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CONTENTS

Editorial	3
The Artists Hand Carola Grindea	4
The Phenomenon of "Peak Experience" or "The Flow" in Musical Performance Carola Grindea	7
Memory and Anxiety Thomas Mastroianni	12
Stage Fright – The Schlaffhorst-Andersen Method for the Prevention and Treatment of Stage Fright Dr. A. Lang	15
Voice and the Physical Performer Hilary Jones	18
Book Reviews Dr. Michael Lasserson, John Nicholls and Carola Grindea	23
Marie Jaell, Pianist, Pedagogue, Scientist, Philosopher Miriam Jorion	26
How can kinesitherapy help to prevent and cure musicians' problems? Françoise Denayer	28
Physical, Physiological and Psychological Problems of Flautists Carola Grindea	30
Motivation Factors in Croatian Music Schools Radojka Suceska Ligutic	33
Two aspects of the Psychology of Performance, Personality Profile and Links with Sport; Stress, Arousal and Anxiety in Performance Judith Brulo	34
Performance Anxiety: a study of children in musical education Anna Rún Atladóttir	35

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Editorial

Carola Grindea

SSTIP organised a most successful *First International Forum on "Health and the Performing Arts"* in October 1997 at the Royal Festival Hall (Chelsfield and Hong Kong Rooms) in London. Medical specialists and musicians from Britain, USA, Russia, France and Germany took part in a Round Table to discuss the serious problems confronting the performing musicians. It was agreed that such dialogues between the medical and musical professions should be arranged at regular intervals.

A Second International Forum on "Health and the Performing Arts" was organised in May 1999, in collaboration with LCMM, once again at the Royal Festival Hall. Eminent musicians, teachers, well known physicians and therapists of the complementary medicine took part in a programme which analysed the causes, therapy and especially the prevention of the many physical and psychological dysfunctions encountered by musicians.

Among those taking part were: *Barry Green*, a most outstanding doublebass player who conducted a hilarious session on how the "Inner Game of Music" brings ease in performance while anxiety and stress vanish. He splendidly demonstrated the "Inner Game" philosophy which he presents in his book ('Inner Game of Music' by Timothy Galway and Barry Green - Pan Books), a must for all students and performers. He played a tune on the doublebass, or to describe it precisely, he pretended to play a tune while a tape was going on with his 'inner dialogue', his voice giving a running commentary on the wrong intonation and other mistakes. The message was clear. Unless the player gives all his attention to the job in hand, the performance suffers. The musicians taking part achieved surprising freedom in their playing and the musical message was immediately communicated.

Peter Feuchtwanger, well known piano pedagogue, presented 'The Feuchtwanger Exercises' which relax the pianist's arms and hands allowing total freedom of performance. These were brilliantly illustrated by the young Danish student, Frederik Malmqvist. The

pianists present were eager to study these most beneficial exercises.

Thomas Mastroianni, Head of Music at the Catholic University in Washington DC, gave a scholarly lecture on 'Memory and Anxiety' assisted by one of his doctoral students, *Patricia Powell*, piano teacher in Oxford (Vice Chairman EPTA UK).

Paul Anders Soogard, a guitarist who has studied the Alexander Technique principles, demonstrated his approach in a workshop with several students who responded well. They learnt to hold the instrument without any undue tensions and realised the importance of a good posture when practising and in performance.

Penelope Roskell, piano professor at Trinity College specialising in Yoga Exercises for Musicians, conducted a session on 'Yoga Breathing' with musicians interested to find out how these exercises can add new dimensions to their music making.

Suzanna Widmer, violinist and doctoral student at London University, dealt with the interplay between 'Hyperventilation' and 'Stage Fright' and how these two physiological phenomena influence one another. *Nina Finburgh*, well known actors' coach, used members of the audience for her session on 'Preparing for Auditions', one of the nightmares of performers whether musicians, actors or dancers.

Workshops on physical problems were presented by *Dr Mosaraf Ali*, who demonstrated how he helps his patients, while *Carola Grindea* conducted a 'Performing Arts Clinic' with several instrumentalists suffering from tendinitis. She was joined by *Elizabeth Andrews*, viola player and therapist, author of 'Healthy Practice for Musicians' (Rhinegold Publishing) who explained her approach when treating musicians.

Christine Harrison, a violinist, who had to abandon her career for several years until she met *Barbara Paull*, a physiotherapist from Canada, who helped her to come back to her instrument, described their work together with instrumentalists' physical injuries. They have published an important book 'The Athletic Musician' -

a Guide to Playing without Pain- (Scarecrow Press).

The Round Table chaired by *Pamela Bowden*, Singing Professor at LCMM, brought very interesting response from the floor. Several participants emphasised the need for instrumental teachers at all levels to realise the danger of allowing young children to misuse their body muscles when playing their instruments.

Other musicians expressed their concern with the difficulties they encounter in their jobs as music or instrumental teachers in their schools. Lack of sufficient funding is certainly one major concern. Others complained about the apathy of some Headmasters who are more interested in getting good results in examinations to fulfil the required quota to be included in statistical tables.

Music does not seem to be an important subject in many state schools. Thus pupils do neither receive encouragement nor are they stimulated to learn to play an instrument. This situation greatly affects the teachers' performance and their enthusiasm. *Esther Salaman*, Consultant at Trinity College of Music, emphasised the importance of singing in Education and talked about her own studies in "Unlocking the Voice" (Kahn and Averill, second revised edition). *Carola Grindea* remarked that ISSTIP, like ISM (Incorporated Society of Musicians) and several Music Teachers Associations like EPTA, ESTA and others, have been struggling to convince the Ministry of Education and other government departments how important it is to continue and develop music in schools in all areas such as class music, instrumental teaching and singing in choirs, and playing in orchestras or in chamber music ensembles, bands, etc. Many research projects have shown that children who sing and make music grow into healthy adults. Vice versa, many adults suffering from mental and psychological problems did not have music education in their school days.

Since the last ISSTIP Second Forum there have been other important international congresses in different countries on the perennial subject: 'Musicians Hand and the Upper Limb'. Endless discussions are taking place with world specialists introducing their latest research or findings, scholarly books and other studies are published on this topic and growing data and information are now available in libraries as well as on the Internet.

How can one explain, though, that in spite of this body of knowledge and

experience and in spite of the care and concern of those involved in the training of instrumental players and teachers, an increasing number of musicians seem to be affected by serious conditions or injuries?

The question is: "What can be done?"

There has been a lot of talk about 'preventing' such problems but there is still a long way to go. ISSTIP's motto has always been 'Prevention is Better than Cure'. We would like to see that other societies and institutions are joining in our campaign for 'action' to

achieve this important goal. First of all, the proposed Course where 'Music Medicine Therapists' will be trained must become a reality. The specialists are ready, the enthusiasm is there – what is needed is a concerted action, and of course the right support.

Let us get on with this greatly needed task!

The Artists Hand an International Symposium

Paris, 10th and 11th March, 2000

A most comprehensive INTERNATIONAL SYMPOSIUM on physical, physiological and psychological dysfunctions of musicians and plastic artists was organised in Paris on 10th and 11th March 2000 by Professor Raoul Tubiana, Director of the 'Hand Institute' in Paris and his team, in collaboration with the European Association 'Médecine des Arts' and its scientific committee headed by Dr André François Arcier, Editor of 'Médecine des Arts' and Philippe Chamagne, Kinesitherapist, Consultant at the Paris Conservatoire. Top specialists from many different parts of the world presented their latest findings. Not less than nine Professors of Hand Surgery, eight Hand Surgeons, several Professors of Orthopaedic Surgery, Neurology, Rheumatology, Anatomy, Physiology of Music, a great number of Doctors of different specialities, Dental Surgeons as well as physical therapists took part in the discussions. They were joined by many musicians - teachers, instrumentalists and students-together with Directors of Conservatoires, Academic Institutions and Centres of Re-education, who came from all over France and from abroad. Rarely has one seen a gathering of such an array of specialists from so many disciplines.

In his Introduction to the Congress Brochure, Professor Tubiana expressed his concern regarding the pathology of artists' hand which has been neglected for many years although thousands of artists - the majority musicians and also painters and sculptors - are forced to

interrupt or even abandon their careers because of their serious problems and injuries of the hand and the upper limb. The seriousness of the situation has resulted in the setting up in France of 'Médecine des Arts' (Art Medicine which includes Music Medicine) and this has further developed into the 'Association Européenne Médecine des Arts' (European Association of Art Medicine) with several European countries as members. Professor Tubiana further emphasised that 'Médecine des Arts' has been trying to put into practice some of the physical and physiological approaches used in Sport Medicine. Artists, like athletes, place enormous strain on their muscles and on their nervous system, very often beyond the limits of their endurance. An athlete's active life is very short compared with that of musicians and sportsmen's performances totally depend on their physical fitness. Their training automatically includes weekly if not daily physiotherapy and massage apart from sessions with Sports Psychologists or Counsellors which are of utmost importance to maintain their well-being and their confidence in their achievements.

Musicians, on the other hand, go to the doctor or therapist only when pain or other difficulties interfere with their work. 'Médecine des Arts' is concerned both with the treatment and the prevention of the dysfunctions afflicting artists and has come to the conclusion that only a multidisciplinary approach can achieve best results. Therefore, a close

collaboration between doctors, artists, musicians and therapists is essential since one discipline alone rarely succeeds in curing complex occupational ailments.

France has taken the lead in this field by having established the first programme of studies, a Two Year well structured Diploma Course, to train 'Art Medicine Therapists'. This is a most welcome development towards the main goal - the prevention of the grave afflictions which are constantly on the increase.

Professor Tubiana has brought to this Symposium the same vision which has inspired him while directing the 'Institut de la Main' (Hand Institute) in Paris: *Team work and a multidisciplinary approach has been the strategy.*

Unlike other international gatherings where parallel sessions are the accepted practice, the Symposium decided that the two days of intensive study, discussions and workshops had to take place in one central venue so that all participants could be actively involved.

All aspects of the many dysfunctions encountered were thoroughly analysed in special sessions: 'Epidemiology of musicians diseases' (C. Dumontier, France), 'Histological Study of muscles in Overuse Syndrome' (X. Dennett, Australia), 'Tendinitis and Tenosynovitis' (C.J. Menkes, France), 'A Specialised

Consultation for Musicians ('C.B. Wynn Parry, Britain), 'Multidisciplinary Approach to Musicians Problems' (I. Winspur and J. Warrington, Britain), 'Neuropsychology of Musical Gestures' (C. Drake, France). 'Stage Fright and the Hand' (A.F. Arcier, France) – to mention only some of the presentations in this first part of the Congress.

Focal Dystonia - the 'Cramp' - and its devastating complexities were at the centre of a number of important communications : 'Apollo's gift and curse: Acquisition and loss of skilled movements in musicians' (E. Altenmuller, Germany), 'Use of Botulinum Toxin Injections to treat Focal Dystonia' (A. Yakovleff, France), 'Controversies in the Etiology of Focal Dystonia' (F. Wilson, USA), 'Prolonged Physiotherapy to treat Focal Dystonia' (P. Chamagne, France), 'Psychological approach to musicians with Dystonia' (B. Kolle, France) .

The Round Table on Prevention brought to light most valuable developments, which emphasised 'the risk factors':

'Prevention of risks due to the Instruments and Instrumental Ergonomics' (R. Norris USA), 'Adapting the Musician to the Instrument or the Instrument to the Musician?' (J. Blum, Germany); 'Prevention of risks due to Instrumental Playing' which stressed the 'Role of Music Teachers' (C. Grindea, Britain), 'The Role of Music Schools and Conservatories' (J. Blum), 'The Role of the Hand Surgeon' (Y. Allieu, France).

The Symposium ended with a session on the *Physiology of Instrumental Playing* – an exchange of views between musicians and therapists. Two teachers presented their approach to the training of instrumentalists (violinists

and cellists) followed by workshops with instrumentalists - a pianist, a flautist and a guitarist suffering from focal dystonia conducted by therapists specialising in this area . It was of particular interest to learn that the therapy consists of regular weekly sessions of 'de-programming' and 're-programming' of the motor-sensory system, a lengthy process which takes between 18 months or two years and which may bring complete recovery in certain cases, others partly achieve the ability to go back to their instrument but do not have the confidence to perform technically demanding works, while some musicians do not show any improvement. (Statistical data available from 'Hand Institute') The guitarist experienced a cure of the right hand but four years later he developed the same condition on his left hand.

The general consensus was that **Re-Education** was essential. Carola Grindea pointed out that the emphasis should be on **Education**.

The Symposium recommended that the information gathered should be disseminated world-wide to reach not only the medical profession but, particularly, the institutions which train instrumental performers and teachers. Furthermore, this information should be available to the various institutions which train physical therapists and therapists of the complementary medicine .

The question is : "Where do we go from here"?

In Britain ISSTIP - International Society for the Study of Tension in Performance - has done pioneering work in this field since 1981, having always advocated a dialogue between the medical and

musical professions. *Words were followed by deeds.*

The first Performing Arts Clinic was set up at London College of Music and Media in 1990; annual seminars and regular workshops and several short courses were organised for musicians (students teachers, professionals), for physiotherapists, Alexander and Feldenkrais teachers and for doctors interested to broaden their knowledge and learn how to cope with their patients occupational disorders.

BAPAM —British Association of Performing Arts Medicine—was established in 1989 and in 1990, BPAMT—British Performing Arts Medicine Trust—(part of BAPAM) opened another Performing Arts Clinic. Both ISSTIP and BPAMT Clinics are privileged to have the same Consultant, Dr C. B. Wynn Parry, thus the musicians attending receive the best possible diagnosis and referrals for the needed therapy.

Further developments are now considered. It is hoped that ISSTIP, BAPAM and organisations such as Musicians Union, Musicians Benevolent Fund, ISM -Incorporated Society for Musicians- EPTA, ESTA and other Associations will collaborate towards developing a similar programme to the one in France and set up Courses which will lead to the training of 'Music Medicine Therapists'.

If France can do it UK should also be able to do it.

Carola Grindea

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The Phenomenon of “Peak Experience” or “The Flow” in Musical Performance

by Carola Grindea

What is this phenomenon ?

THIS most elusive and mysterious phenomenon which many performing artists experience at some moments during a performance, has been studied and analysed the first time as early as 1962 by the psychologists A. Maslow ('Towards a Psychology of Being' Princeton N.J Van Nostrand 1962) and M.Lasky ('A Study of some Secular and Religious Experiences' Bloomington, Indiana University Press 1962).

Maslow suggested the term 'peak experience' to describe "those moments of highest happiness and fulfilment when the performer experiences an ecstatic, non voluntary state of total integration and internal peace" - a state which is accompanied by loss of fear, inhibitions and insecurities.

This state has been superbly described by Sir Roger Bannister M.D. after completing the impossible feat, running ONE MILE in 3.59.4 Minutes on 6th May, 1954: "...my mind seemed almost detached from my body...there was no strain...no pain, only a great unity of movement and aim..." (Roger Bannister "The Four-Minute Mile." Lyons Press 1955).

M.Czyksemihaly became involved in the study of 'human development' and describes the phenomenon as 'Flow' ('Beyond Boredom and Anxiety: the experience of Play in Work and Games' Jossey-Bass 1975) while Kenneth Ravizza, a Sport Psychologist, was concerned with 'Peak Experience in Sport' (Journal of Humanistic Psychology 1977, 17.4.35-40).

Many more studies have been undertaken since, mainly in the field of Humanistic Psychology and in Sport Psychology. Gail Privette published several communications on the subject: 'Dynamics of Peak Performance' (Journal of Humanistic Psychology 1981, 21.1.57-67) followed by 'Factor Analysis of Peak Performance - the full use of Potential' which she wrote jointly with T.Landsmann (Journal of Personality and Social Psychology 1983 44.195-200).

In a further study, Gail Privette presented a thorough analysis of positive human experiences in a communication on 'Peak Experience, Peak Performance and Flow' (University of West Florida, Pensacola, Psychology Dept, 15 October 1982). She defines 'peak experience' as intense joy, 'peak performance' as superior functioning and 'flow' an intrinsically rewarding experience, although she admits that it would not be easy to realise the exact moment when these appear isolated .

While Sport Psychology and Sports Medicine are very highly developed in many parts of the world, Music Medicine and Psychology of Music, although having gained ground in recent years, are still very much behind. Moreover, there is a close collaboration between the medical specialists and the physical therapists involved in sport injuries and the sport psychologists for the simple reason that athletes active life is short and their performances depend on their total physical, mental and psychological well being . The specialists working in these areas are doing constant research and there is a continuous exchange of information so that they can give athletes in their care the physical, psychological and mental training which prepares them to reach their highest potential as well as to sustain that optimum state . This, in turn, brings them the satisfaction of being in total control during matches or other contests. Sponsorship for sport has grown into a vast commercial enterprise, thus ample funds are available for reasearch and for other developments.

Musicians, on the other hand, are known to develop an awareness as to the state of their body only when pain or other discomfort occur.

In Music Medicine,Medical specialists work closely with physical therapists, trying to help musicians suffering from physical problems and /or injuries, occasionally referring cases to therapists of the Complementary Medicine and, only when they consider necessary, to an 'Art Psychologist

Consultant' or a ' Counsellor' to deal with the psychological state or with stress or anxiety in performance. The doctors involved in "Performing Arts Medicine" are aware that only through a close collaboration with musicians and with other specialists the right results can be achieved. In the words of Professor Raoul Tubiana (see "TheArtists' Hand") *only a multidisciplinary approach is the answer.* Unfortunately Music Medicine and Psychology of Music do not work as closely as in Sport although most musicians suffering from physical injuries are also afflicted by psychological trauma.

The majority of studies undertaken by students in the Psychology of Music Faculties seem to concentrate on the effect of stress or anxiety on musical performance. It is also true that, in recent years, more students of Music Colleges and in Music Faculties are involved in dissertations on this topic. The emphasis should be on all aspects - physical, physiological and psychological – as these cannot be separated. There should be more knowledge and understanding that physical problems and psychological trauma feed on one another

In my own studies on the many aspects of tension and how these affect a performance I have reached certain conclusions which may be of interest to those concerned. While the positive tension is most valuable, it brings intensity and contributes to a vibrant performance, the negative aspects can cause many serious and sometimes lasting damages. These often result in physical injuries which, in turn, create psychological problems.

I have been searching for many years to find a 'coping technique' which would help the performer at that crucial moment when appearing on the stage. Many artists study Relaxation techniques or various Easterns (Yoga,Tai-Chi, Zen, Meditation ,etc) or Western (Alexander, Feldenkrais) disciplines. I have evolved a simple, easy to acquire strategy which 'liberates the body and the mind of any negative

tensions, leading to a total liberation of the performer' – the *Grindea Technique*. This technique brings perfect alignment of head, neck and back by correcting any imbalance in the body and its stance, it allows freedom of breathing - through long, slow exhalations and the body reaching an ideal state of balance (not relaxation). The musician experiences an exhilarating sensation of lightness, of almost floating and there is stillness in the body and in the mind. *This is the state of body and mind when a performer experiences the flow, that magic moment of the 'peak performance'.*

Once the technique has been learnt, it only takes a few minutes of mental concentration to reach this state of balance and the performer is ready to start preparing for performance. This coping technique has proved highly beneficial in my work preparing musicians for performances while learning to cope with their tensions and anxieties. It has also proved of great value in helping hundreds of musicians with their physical problems and with their injuries at the ISSTIP Performing Arts Clinic at London College of Music and Media (the Clinic celebrated its 10th anniversary in May 2000). Among them were many instrumentalists and singers - performers, teachers students, amateurs - and other performers such as actors, dancers, broadcasters and journalists afflicted by various problems, physical injuries as well as by stress or anxiety in performance. (Data base available).

Quality of the Peak Experience

For the sake of clarity I will consider studying the phenomenon as ONE - the '*peak experience in performance*' - that extraordinary moment when the performance transcends, gaining new dimensions, when the performer experiences a magical state of exhilarating lightness of body, totally free of any tension, while his mind remains alert, aware of the music 'flowing' through his whole being, into the space around him and beyond.

Since this phenomenon is a subjective experience of a non voluntary nature which occurs at the height of a performance - be it in music, theatre, dance, sport, or in moments of intense creativity such as writing, painting - to mention only these few, it would be difficult to obtain a scientific study unless one uses highly sophisticated devices. At present it can only be

studied through a systematic analysis of personal statements or self-assessments.

Therefore, students of this phenomenon have to rely on the answers to questionnaires which participants agree to complete at different stages during their activities. It is only through this type of data that one can come to a realisation of how such experiences are perceived by each individual and especially how such experiences affect each individual.

In the course of my studies I have interviewed more than fifty well known pianists who responded to my questions. It is of interest to note that their description of the experiences and of the state of the body and mind at those moments are very similar.

Does this mean that although physically each one of us is a unique individual, physiologically we are all alike, therefore the physiological responses in similar situations will be similar?

Focused Awareness of Body and Mind

Most comments stress "high level of mental awareness" ... "I am not only the re-creator of the composer's intentions but also the creator of my own performance", "... I am aware of the inspiration flowing from within and from without..."

"... an extraordinary state of consciousness ... aware of being in tune with the universe. I feel like a vehicle through which the outside forces are moving to sustain my desire to serve the music which flows through my whole being towards the expectant audience" (J.L. Interview Piano Journal No 19 Vol 7 1986)

"... I experience a tremendous awareness ... 120% awake, ready to undertake any task... Everything seemed so right, the music just flowed and my body was totally in harmony with everything else. This 'body feeling' when performing gives me a familiar sensation that my piano is not only 'my instrument' it is part of my whole being . . . this affinity creates in me an extra sensation of being safe yet very alert (A.C.Piano Journal No 31 Vol 11. 1990).

Transcendence of Self, Altered Perception of Space and Time

"...Such moments are very mysterious, they are truly spiritual phenomena . . . perhaps this is what one calls inspiration, but there is much

more to it. I find these experiences so powerful, so intense that I would be even afraid to analyse them..."(A.S, Piano Journal No 36 Vol 12 1991)

These are only some of the statements concerning *the artists' state of consciousness during the 'peak experience'*, their '*heightened involvement*' and a sense of wonder at the exquisite quality of the performance which often created an '*altered perception of time and of the space around*'.

"...When I reach such a state I become even more aware of the space around me and although 'my space' does not expand I have the sensation that it never ends ... I have the strange sensation that I am at the piano but I am also somewhere else in the hall , I am everywhere . . I hear the sound of the piano going round the hall, reflecting against the walls and coming back, enveloping me...At such moments I identify myself with the audience which receives my music and we become one single unit ." (A.C. Piano Journal id)

Most interviewees talked about '*being inspired*' by the greatness of the music they were interpreting, '*creating and re-creating it*' and, invariably, about the '*uniqueness*' and the '*intensity*' of those magic moments which stand out in the memory and, sometimes, create an uncanny emotional response only when describing them.

" ... for me it is the music that matters and if I am involved in the performance with all my being, the music helps me to find the way to achieve this . 'It plays', and it feels as if 'I am no longer playing it' although my mind is very alert and 'I am still in charge of my performance' (B.D. Piano Journal No. 48 Vol 16, 1995)
" ... whenever I perform I give so much of my whole being, I feel the music so intensely that afterwards I am utterly drained,yet I emerge exhilarated from and by such an experience.." (M.L.Piano Journal No 35 Vol 12 1991)

"...only the music and its challenge matter, demanding complete subservience of the player to the composer's intentions and to the spirit of the work ...when I play I experience a wonderful sensation as if the music is 'sounding through my whole being', with no barriers and is communicated to the audience . . . " (E. P-A Piano Journal No 12 Vol 4 1983)

Do these experiences bring happiness and satisfaction?

Would performers like these to be part of every performance?

When asked whether these experiences brought happiness and satisfaction or were disturbing and whether the players would like these to be part of every performance, the answers varied.

Many spoke of the unforgettable state of utter fulfilment, a total integration of the being, with the instrument and the music. Some experienced inner peace, others immense joy and excitement, yet each one pointed out the transient nature of the experience, not knowing *when* and *why* it was happening, nor when it vanished.

"One evening when playing Rachmaninov Concerto No 2, it seemed that the work was born at that moment. It became a completely new work and my excitement and happiness were such that long afterwards I could not come to a resting point. Even during the night I was unable to keep my legs still ... I was going over and over again in my mind through the events of the whole evening and I would have given anything to re-live those moments ..." (J.W. Interview unpublished) August 1989)

Only two artists admitted that, although they found these experiences enriching and very satisfying, they would not want them to occur every time they appear in public. "...I would not want to feel that the moment I start playing, 'the magic moment' will be there. I like to know that I am responsible for what I intend to do and for what I am doing..." (A.S. id)

"...I never understood *how* and *when* this happens and I do not wish to go through such experiences everytime I appear in public... I want to know that I am in full control, that I take my decisions as to the different sounds I intend to choose for every piece I perform ... I detach myself emotionally and *I am immersed only in the aural experience*. The aural sensations are very much part of my music making, so much so, that I sometimes find myself being carried away from my 'homework', and hearing myself playing as I did not intend... (A.C. id)

Who knows? Are such moments another 'peak experience' occurrences?

How to prepare for the 'Peak Experience'?

Sport Psychologists have devised systematic and highly disciplined training of athletes preparing them for those feats of physical and mental endurance which give them the confidence that they are in control and

able to give of their best in their performances.

Musicians do not receive such training and in my interviews, I was confronted with a variety of 'ad-hoc' strategies.

"...for each performance I prepare myself mentally, going through every moment of the music in my mind, sometimes repeating again and again certain phrases which I consider 'key-phrases', until the moment of going on to the platform ...I am one of those 'nervous' players, not suffering from anxiety, but, on the contrary, I experience a state of such excitement, those nervous impulses creating extraordinary sensations in my arms, my hands and the tip of my fingers and then I know that I am ready to begin. I become aware only of one thing - that I am doing my utmost to re-create the works I play and that I can offer to my audience an interpretation as near to my ideals as to those of the composers." (R.L. Piano Journal No 6 Vol 2 1981)

"... my own special 'method' whether practising or getting ready for the stage is a form of 'meditation' at the piano. I sit very still, with arms and hands in playing positionI feel very relaxed and, with my eyes closed, I listen intently in my mind to the sounds of the music I am going to play. I am slowly moving my hands along the keyboard, gently stroking the keys, feeling their smooth ivory .. I begin to play and I experience the music flowing through my body, through the instrument, reaching the audience and beyond. . ." (E P-A. id)

"...to sustain my ability to perform without wasting energy and to achieve an optimal level of self-realisation ..I need a quiet withdrawal into myself for certain periods of each day to experience a renewal of my energies and am ready to take my tasks anew ... (G.O. Piano Journal No 55 Vol 19 Apr 1998).

Several pianists talked about the role of the audience during those moments

"... the music starts to speak for itself ...that moment of bliss when artist and music become one and you feel the audience sharing in this unity ...there is complete hush ...everyone is listening intently, totally at peace ..." (M.T. Piano Journal No 52 Vol 18 Febr 1997)

Of unusual interest is an interview with a well established Piano Duo:

" when I experience such moments in my playing I sense them also in my partner's state ...both of us feel that our playing has reached an uncanny

dimension ...The audience is also totally involved ..." (L.Z & I.Z unpublished interview August 1998)

This, perhaps, is another proof that the moment of inspiration is experienced not only by the player but also by the audience .

The value of the Study of Peak Experience to enhance the performance.

Since we do not know *when* and *how* this phenomenon occurs, we can only learn from studying the self assessments of performers which describe the state of the mind and the body at those moments.

These prove that only when the body and the mind are totally liberated of any tensions the Peak Performance occurs. Only at that moment there is total musical communication and the audience also experiences complete involvement sharing the experience with the performer.

Therefore, it is of great importance that musicians should be encouraged to adopt a healthy regimen, looking after their body just as sportsmen do, as well as preparing mentally through a systematic programme . This would include all features of preparation: the learning processes to master the musical and technical aspects of the works to be played as well as a disciplined routine.

At the ISSTIP Performing Arts Clinic Dr Wynn Parry, the Consultant /Adviser. insists on regular exercise (see - *General Advice to Musicians' ISSTIP JOURNAL* No 9 October 1998). Most instrumentalists lead a sedentary life, practising for hours in the solitude of their studio then performing, also sitting down, unless one sings or plays as soloist standing up.

I work with each musician individually on preparation them for performance

1. Physical and Physiological Factors

- (a) Learn to liberate the body of any tensions
- (b) Acquire correct posture
- (d) Be aware of freedom of breathing.
- (e) Acquire an instrumental technique based on natural, physiologically correct movements, in harmony with the body, not against it. Study Interaction between player and instrument (Ergonomics)

2. Psychological Preparation

- (a) Study various coping strategies
- (b) Relaxation techniques. Eastern or Western Disciplines (Yoga, Zen. Meditation Tai Chi. Chi Qong. Alexander, Feldenkrais, Grindea).
- (c) Mental Study: Creative Imagery, Mental Rehearsal
- (d) Frequent rehearsals of concert programmes.

3. The Performance

The strategies studied so far to control any involuntary physiological reactions should help the musician at this moment. My recommendations are:

- (a) Bring body in state of balance and exhale slowly several times (Grindea Technique)
- (b) experience a state of calm in the relaxed 'solar plexus', the diaphragm area
- (c) Trust your work and allow the music to flow through your body, through your arms and hands into the instrument and beyond.

Such a preparation liberates the body and mind allowing the peak experience to occur.

Many instrumentalists and singers who attend the clinic have not reached a level of ability which could induce such a state . They are still studying or are engaged in teaching and they came to the Clinic because of their physical

problems or to learn how to prevent such problems. Our objective is to help them in their studies and to adopt a healthy approach to their instrumental technique so that such dysfunctions may be prevented.

On the other hand, quite a few of the pianists I have interviewed admitted that they have never experienced that state of total liberation yet their performances were well received by the public and they seemed satisfied that 'everything went quite well'. Most of those interviewed did admit that they reached a high level of performance in concerts and even in competitions, obtaining a prize – 2nd or 3rd – yet never a 1st!

"...I was so intent trying to do my best, playing every note and controlling the keyboard that I could not 'let-go' "(C.E. unpublished Interview Oct 1993)

Our goal, though, is to prepare all those in our care to achieve utmost ease and freedom in performance so that they can enjoy every moment, no matter what level of skill they have reached. ('Inner Game of Music by Tim Galway and Barry Green, Pan Books)

The exploration of this complex phenomenon in musical performance has been a valuable learning experience. It made me realise how vast the subject is and how much more research is needed. This is only a beginning and I hope that it will inspire others to carry this exploration further for the benefit of musicians in their constant search to reach their highest potential.

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I would be grateful if you would consider taking part in further research by answering the following

QUESTIONNAIRE

If you wish, your answers will be treated as confidential. Please state: Yes No

- 1. Have you experienced such moments when performing?** Yes No
- a) Is this a mere occurrence '?' Yes No
 - b) Are you subjected to such a state every time you perform? Yes No

2. Can you describe the experience? (Be free to elaborate)

- a) State of Mind
- b) Body Awareness
- c) Quality of Performance
- d) Involvement in the activity

3. Did this experience

- a) Bring Happiness
- b) Disturb you
- c) Would you have liked it to continue
- d) Would you wish this to be part of every performance

4. Any personal details or suggestions

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Memory and Anxiety

by Thomas Mastroianni

Pianist, Head of Keyboard Studies, Catholic University, Washington D.C.

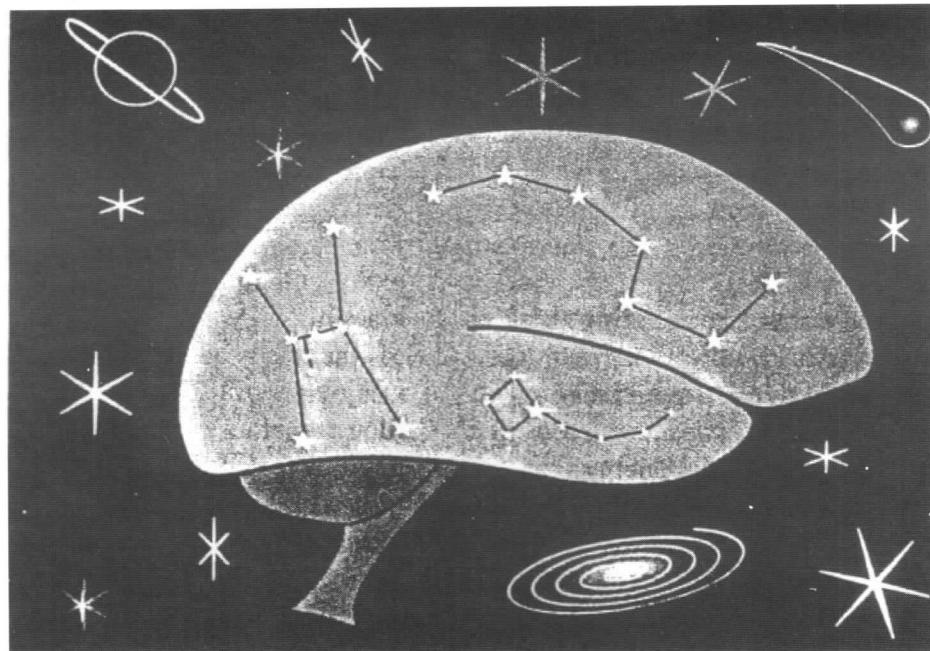
HUMAN memory is one of the wonders of the universe. Like the universe with its billions of stars, the human brain is a constellation of billions of neural cells. These cells communicate with each other and form networks that are the basis of human awareness and memory. Learning a piece of music is a process of forming connections among these cells, perhaps loosely analogous to the clustering of planetary systems and stars into constellations.

The configurations of neural networks are unique to each individual. Each person's memory is formed from the bits and pieces of existing networks resulting from previous musical learning. To these existing pieces, which reside in the learner's "musicianship storehouse," are added the specific immediate requirements of the memory task at hand. As new material is encoded in the memory, old networks are expanded and new memory constellations emerge. For example, in memorizing a passage that contains a scale, memory of previous scale passages forms the building block for the new memory.

The plasticity or reconfiguration of neural networks gives the learner of music confidence that effectiveness in past work and practice will always be helpful and beneficial to new learning. The skilled performer literally builds on past successes.

Memory networks are constantly being reshaped and altered by current neural activity. Emotional activity is as potent as cognitive memory in its effect on memory. Signals from emotional activity radiate through memory networks as we learn and as we attempt to recall stored information. Likewise our conscious thoughts constantly influence what and how we know and remember. This activity can influence long-term memory.

Even when neural memory networks are not permanently reshaped, fears and doubts about what is stored in memory can still influence what is remembered. Such feelings can interfere with recall by directing attention away from the prepared memory task. Anxiety can alter the focus of attention.



Anxiety encourages you to concentrate on self-preservation and safety. It makes you "self" conscious rather than "task" conscious. The importance of attention focus in memory tasks cannot be overemphasised. Often what the performer calls a memory slip is not at all the result of faulty memory storage or network reconfiguration, but simply misdirection of attention or poor focus. Although a great deal of what the pianist does is automatic, novel signals from the limbic brain regions, where anxiety operates, can disrupt the flow of automatic response patterns that have been programmed by practice.

In a state of anxiety, the body functions on a different program than when it is calm. Two alternate nervous systems handle these two body states: The anxious state is the work of the sympathetic nervous system, and the calm state is the work of the parasympathetic nervous system. When a threat is perceived, the body circulates adrenaline to activate the sympathetic nervous system. This brings into effect all those body responses and postures that are useful for survival in a primitive environment. The heart rate increases to pump blood more forcefully to where it may be needed. The blood supply to the larger

muscles is increased, and the blood supply to the digestive system and to the smaller peripheral muscles is greatly reduced. When threatened by a tiger, digesting lunch is largely irrelevant—and so is playing the piano, or anything requiring fine finger coordinations.

Blood flow to the brain in anxiety situations increases mental alertness, but may also encourage racing images and thoughts that never occur during practice. Often the performer will ask questions and raise doubts that normally would not occur. "What note comes next?" is not a question likely to be part of ordinary rehearsal, yet this kind of microscopic over conscientiousness can create havoc in performance. Also, in a state of anxiety, the performer may invent novel ways to imagine danger in the execution of normally secure passages. This hyperactive mental state can threaten memory, because brain networks are activated that normally would be silent during rehearsed signal-sending operations.

Other sympathetic nervous system body alterations such as increased peripheral vision and light sensitivity, increased perspiration on the palms of the hands, dry mouth, and increased muscle tone—all of these and more can

create such an unfamiliar body feel and body state that the environment for remembering the score is radically altered and memory is threatened.

The parasympathetic nervous system, on the other hand, is the normal state for most of us in our daily activities. In this state, the excess adrenalin associated with anxiety does not bring into play the anxiety symptoms listed above, and the brain networks that carry the musical memory function more in the manner, and in the neural environment, in which the memory networks were formed. The chances of uninterrupted memory are obviously much greater in the parasympathetic state.

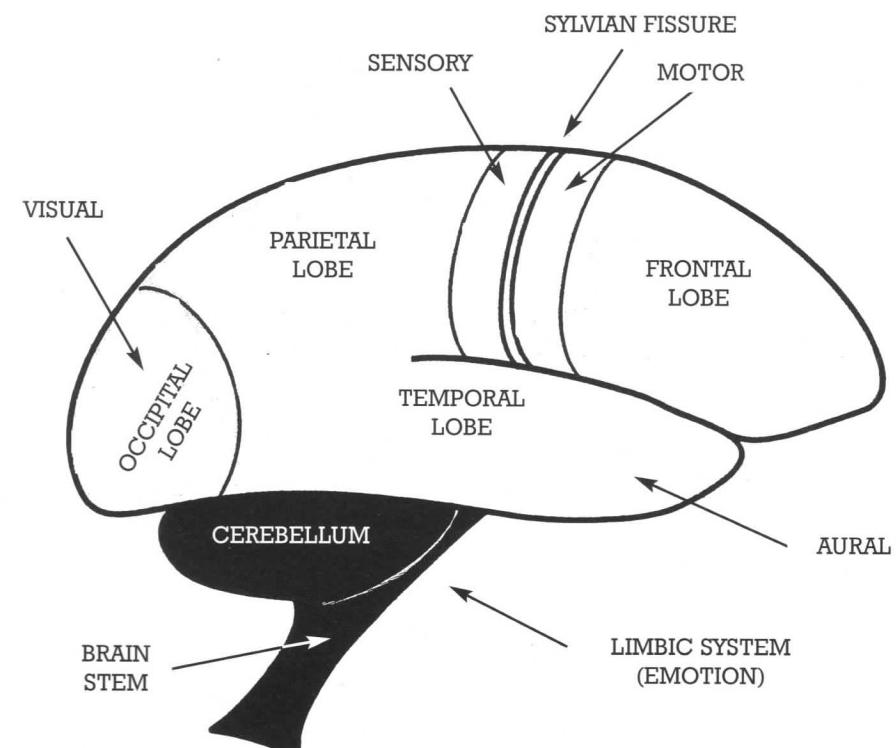
So how does the performer retain this calm state? This is easier said than done. Anxiety is most insidious when it is built into the memory networks themselves. This happens when anxiety is part of the learning environment. Deadlines, fear of criticism, exaggerated self-esteem, and worry can become habitual. Panic can be practiced into the motor response. Repeated practice in a nervous state can associate unwanted feelings and insecurities with the memory of the passage itself. Associated or learned anxiety can be difficult to remedy.

Ironically, practice that concentrates on avoiding danger is likely to condition the performer to anxiety responses instead of confident motor output.

"Be careful not to make a mistake" is a bad frame of mind if the goal is to avoid anxiety. (Keep in mind that there are some performers for whom a little anxiety is not so bad.) *Positive concentration on musical content is better for most!*

The musician who spends a great deal of time working to establish "emergency stations" will build some anxiety into the performance. *A secure musical flow can result from good phrase definition and from confidence in knowing musical landmarks without considering these as escape routes.*

Worry over technique can result in what's called irradiation, which is the exertion of more neural energy than the task requires. It is at the root of much uncoordination and stiffness. This physiological anxiety gets built into the performance when good decisions about fingering, technique, or an efficient choreography are missing. Inefficient technical practice induces fatigue and invites the brain to send out



too much neural energy to get the job done. Generalized signals activate larger muscles and obviate fine tuning of discrete and well directed signals to smaller muscles that could do the job better.

Learned anxiety can occur whenever the performer is self-centered rather than music-centered. The habit of self-concentration leads to self-doubt in many instances. Self-awareness for the sake of making evaluations to improve the music can be quite productive. Dwelling on what critical listeners are thinking, however, or on how you are faring in the performance or preparation, or on how you wish to capture recognition or praise—these can produce learned anxiety.

Different brain regions deal with different kinds of musical memory. *Motor memory* is sometimes referred to as haptic memory. This can include the musician's finger memory, both tactile and kinesthetic—you can remember the feel of the keys and the feel of certain motions required to perform a passage. Motor memory may also include the physical commands that activate the fingers. These could be set in motion by three interacting brain cell networks involving the sensory area of the brain in the parietal lobe, the motor area near

the Sylvian fissure at the edge of the frontal lobe, and a variety of connecting points and processing networks in the cerebellum and brain stem.

Visual memory and *aural memory* can be understood as requiring similar interacting networks or cell assemblies located in various regions of the brain. These networks can interact and are constantly being reshaped by current experience, reflection, and practice. The way in which anxiety and emotion can interact with these networks is a fascinating subject for future research.

Anxiety can be a potential limbic modulation of memory. In his book, *Memory and Brain*, Larry Squire describes the contribution of the area of the brain responsible for emotional activity (the limbic system in the brain stem) as responsible for the modulation of memory formation. Chemical neurotransmitters associated with limbic activity may assist in memory formation. As we learn, the very chemistry of our anxiety may influence what is remembered.

The radiations from limbic activity, moreover, may be presumed to have the potential for influencing recall of stored information as well. Fear, anger, and other emotions may contribute to a neural environment in which recall is threatened. If so, a performer who

experiences emotions not associated with the music placed into memory may find a mental environment hostile to the recall of the music. What may be worse for the performer is a situation in which fear has been associated with the recall to such an extent that the music cannot be recalled without the fear. In either case, the smooth flow of motor signals cannot be presumed to proceed unaccompanied by a high degree of limbic neural energy (perhaps outside of conscious control or awareness). This neural energy may not be a hindrance in all cases. Emotional activity can add to the excitement of performance, but most performers know what happens when excitement becomes excessive or uncontrollable.

What can a performer do to manage anxiety and maximize memory performance on stage? The easy answer is to stay calm and do what has been rehearsed. Someone who has never performed may ask, "Why doesn't the performer just do what was rehearsed?" After all, the point of rehearsing is to raise the odds that the rehearsed responses will prevail. Do performers have a "death wish?"

Many performers have undertaken deep soul searching and psychoanalysis to learn how to cope with performance anxiety, and many have found help in meditation, relaxation exercises, deep breathing, yoga, autogenics, and in medically administered drug treatment. Stress reduction in normal daily life can create a lower anxiety baseline so that reasonable amounts of performance

stress are more tolerable. Effective treatment can vary from performer to performer because the cause of anxiety can vary from one individual to another, and from one performance to the next.

The following cognitive management techniques promote more secure memory. First and foremost, in order to manage anxiety, don't argue with it onstage or backstage, or attempt to deny it. Honesty is best. Recognize your anxiety, but then go on with the performance and be willing to accept the outcome honestly. If possible, recall the mental environment of rehearsal and the good concentration that went into the practice. If rehearsal was unfocused and concentration was poor, then of course you have earned the present state of anxiety and might as well accept it. Trying to be what you are not is the root of more anxiety.

Focus and concentration on the music are facilitated by an attitude of service to the music rather than of self-service. Trying to make a good impression on the audience diverts energy from the message of the score. It is the music itself that must make the impression. Musicianship rather than showmanship aids memory, because musicianship pertains to the message to be delivered, whereas in most cases showmanship is the shallowest of messages and is often irrelevant. If memory encoding has been accomplished by musical meaning, then the message of the music is its best mnemonic. As it unfolds, the music itself is the best cure for what comes next

because of the universal internal logic of great music.

Trust is the best onstage tactic to promote good memory and anxiety management. Trust that the work you've done will stand up. Trust that the body knows how to do what was prepared. The brain is the most trustworthy machine ever created. In most of us it works better than we have any right to hope. At times, lack of trust is the only flaw that can defeat it. Trust allows and empowers focus and concentration. Lack of trust activates a search for survival mechanisms and alternate routes and diffuses concentration. Attention to the musical message and to what was rehearsed is the only hope the performer has that the brain will function as it was prepared to function and will remember what to do. The performer has no logical alternative to trust. It's a must.

Anxiety management and good memory are boosted by strong motivation. Love of the musical art and a missionary spirit that seeks to deliver this value to others bring a spiritual force to performance that worry would diminish and devastate. The performer motivated to uplift the audience, rather than merely to impress it, will find the concentration and the focus that are so necessary for peak performance. With this kind of motivation, anxiety becomes excitement and doubt becomes trust.

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The Schlaffhorst-Andersen Method for the Prevention and Treatment of Stage Fright

An insight into a Teaching Approach from CJD Schule Schlaffhorst-Andersen School in Bad Nenndorf, Germany

by A. Lang

School for Respiration, Speech and Voice

The Schlaffhorst-Andersen® School is currently the only institution in Germany that provides training for the profession of "State-registered Respiration, Speech and Voice Teachers." The Schlaffhorst-Andersen Method has been taught since 1916, originally under the name "The Rotenburg School of Respiration".

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- c) Work at schools of music and drama, conservatories, theatres and opera houses

The Schlaffhorst-Andersen method offers a structured and holistic prevention and treatment approach to stage fright. It combines a science based on the understanding of breathing and voice techniques with cognitive, emotional and total-body approaches. The Schlaffhorst Andersen concept is based on the reciprocal psycho-neuro-motor actions of the organism with the goal of improving performance ability, power of expression and health of the musician.

Musicians and Performance Anxiety

"Music is hard work." This statement by Justus Frantz characterises the musician's profession. Besides numerous hours of daily practising one particular stress factor rules the daily existence of a professional artist: being constantly exposed to the often merciless scrutiny of fellow musicians and the audience. Not only an artist's technical performance but also his

personality and other individual aspects are constantly observed and discussed.

Provided a musician is able to cope physically and psychologically with the stress the latter has a positive effect on a performance and even enhances it by increasing his receptivity and reactive capacities. However, unfavourable social conditions (family environment, culture, etc.), personal attributes (behaviour-related, psychodynamic, cognitive and biological) and professional idiosyncrasies (technique, artistic maturity, degree of exposure) can result in performance stress leading to fear of failure, fear of competition and may threaten professional survival. As soon as such anxiety starts to interfere with the artist's performance, professional help is advisable.

In anxiety situations, the organism reacts in a stereotype manner with sympathetic activation of the autonomic nervous system. The alarm reaction, triggered in the hypothalamus and the diencephalon and transmitted by

heightened sympathetic arousal, is an evolutionary survival tool to deal with life threatening situations ('fight or flight'). A musician whose body is 'attacked' by such a reaction, particularly in moments of extreme concentration, is greatly impaired in his performance.

Each of us knows the importance of a previous and 'appropriately tensed' body for optimal musical performance: Flexibility and breathing rhythm are not just a precondition for flexible articulation and musical flow for wind instruments and singers. A musician whose body is 'on the run' is rigid in his activity. He plays with stressed muscles and hesitating, flat, hasty breathing. This effects the expressive power of the music and is furthermore transmitted to the audience, as shown by the American scholar John Diamond (2).

Failure occurs and if this is happening in other performances it creates a vicious circle which, in turn, will lead to a "learned anxiety reaction": *performance anxiety*.

The treatment of learned performance anxiety is far more difficult than its prevention.

The well-known symptoms of performance anxiety are all an expression of an activated sympathetic nervous system: cold, moist fingers, dry mouth and gastro-intestinal problems, palpitations of the heart, mental blocks, excess muscle tension and trembling of motor muscles, but also of the voice and respiratory system and many others. Widmer et al additionally showed in a study of 141 musicians a positive, anxiety-related correlation between the appearance of disruptive stage fright and hyperventilation (9). Statistics indicate, that more than 41% of all musicians of both sexes suffer from stage fright (3) and recourse to medication is widespread and habitual (5).

The treatment of stage fright includes several different approaches: Behaviour-based approaches like optimum preparation, appropriate selection of pieces to play and systematic desensitisation through habituation (frequent public performances) characterise the daily life of many musicians. An in-depth psychological analysis of anxieties is rarely conducted. If one wants to deal adequately with the multi-factor genesis of performance anxiety, a multifaceted, i.e. holistic, treatment concept is required which combines cognitive, emotional and total-body approaches. The Schlaffhorst-Andersen concept is based on such a therapeutic approach. It is based on the reciprocal interaction between emotional processes, reactions of the sympathetic nervous system and motor performance and aims at improving

- the capacity for expression
- the ability to perform and
- the health of the musician.

The Schlaffhorst-Andersen Concept

Frequently, a musician's instrument is much better taken care of than the musician's own organism. Most people only become aware of their bodies once they are in pain or when certain musculoskeletal functions are impaired as in the case of performance anxiety. While most musicians almost immediately notice the effects of e.g. climatic changes on their instruments they are quite unaware of current muscle tone, respiratory behaviour and so forth. If we conceive the body as the instrument, this implies that

together with learning to play a musical instrument, dealing with the instrument 'body' must also be learned. In order to ensure beneficial tension and thus muscular flexibility a musician needs to take note of and accept the body with all its sympathetic nervous manifestations. Only on this basis it is possible to deal with performance stress in a manner that compensates for the detrimental influence of autonomic arousal.

Autonomic and voluntary nervous systems and the psyche are holistically combined into a single large network by means of messengers and signalling substances (such as neuropeptides) (11). According to Zänker (11) and Pert (6), the neuropeptides are biochemical carriers of emotion. The brain's limbic system, the basal ganglia and motor nuclei of the thalamus are connected with each other and thus link unconscious personal expression to body posture and motion. And the cerebellum (in the rear part of the brain concerned with the co-ordination of movement and muscle action) is according to recent findings (7) largely involved in emotions. In this we find a neurophysiological correlate for the reciprocal effects cited above between emotional processes, vegetative reactions and motor performance. By external effects on one of these functional constituencies, both other areas are likewise affected. Breathing plays an important part in this relationship. Respiratory rhythm (as well as respiratory volume) are involuntarily adjusted to existing circumstances by means of respiratory centres in the brain stem. In addition, the respiratory muscle system is voluntarily controllable via the cerebral cortex. Thus the function constituency of breathing fulfills a unique key function as intermediary between the somatic and vegetative nervous systems.

What therapeutic consequences emerge from this for treatment of performance anxiety? The objective is to influence the vegetative nervous system in the direction of attenuating the excessive sympathetic arousal and muscle tone. For this, we use the reciprocal actions cited by systematically counteracting the influence of the sympathetic nerves with deliberate breathing and motion work with particular reference to their emotional aspects.

The procedure

In the first instance, our students train their self-perception (sensory system). Trained body consciousness makes

perception and familiarisation with one's own conditions possible, the musician gets in touch with his own body, he learns to notice even minor body signals and to pay attention to them. He can thus consciously experience the context of external and internal motion, that is of muscle tone, posture, motion, voice and mood, breathing and pulse. The contact with his own focal point has at the same time a centering element which contributes to psychological stabilisation and extends also beyond the stage performance. Sensitive perceptions of one's self are accompanied by improved perception and awareness of others as well. This in turn has positive effects on joint performance of music.

On the basis of this body consciousness, deliberate means of compensating the autonomic reaction can occur, in our case by reducing excessive sympathetic tone. Our 'additions' to the vegetative system form the functional constituencies of motion, breathing, voice and, by means of basic cognitive and emotional components, the psyche.

Motion

As discussed above, performance anxiety creates an increased tone of the entire skeletal muscle system. Our objective is not relaxation but the right kind of tension (*eutonus*). We try to create a condition appropriate to that of the situation on stage, thus facilitating an artist's necessary presence, musical expression and concentration without however, blocking the motor system. We do not advise *tension-reducing* procedures like general or local unblocking, exercises while lying down, downward-pointed movements connected with breathing or reinforcement of floor contact, but we recommend *tension-compensating* methods such as the circular and oscillating motions which are part of the five paths to regeneration according to the Schlaffhorst-Andersen method. The latter involves deliberately prescribed motion actions in which the body is in constant confrontation with traction, pressure, gravitational and centrifugal forces. By stimulating the balance and mechanical receptors such as the muscle spindles with their associated nerve fibres, a constantly reproduced tension-balance of the postural and respiratory muscle systems is established, where hypertonic muscle fibre groups are released while hypotonic regions are activated and, which ultimately allows the desired *eutonisation* (appropriate and beneficial muscle tension) to occur.

Breathing

Work on breathing constitutes the centrepiece of the Schlaffhorst Andersen method. The heightened tone of the abdominal and pelvic floor muscles obstructs respiratory motion. The increased need of oxygen in stress situations cannot be compensated by means of an increase in the volume of respiratory action and is compensated by acceleration of respiratory frequency. Enlarged respiratory motion is likewise evident in the uneconomic form of deep breathing. If respiratory volume exceeds muscular activity (i.e. metabolic need for oxygen) as is frequently the case on stage, then the typical symptoms of hyperventilation exacerbate the problem (9). Breathing exercises must therefore facilitate ease of breathing by increasing the volume of each breath while reducing the frequency of breathing. This must be achieved in connection with *eutonisation* of the obstructed muscle groups. For this, a further regeneration path according to Schlaffhorst Andersen is suitable: work on individual tripartite breathing and motion rhythm. After the two phases of breathing in and breathing out there is a third phase, the pause in breathing, characterised by a relaxation of the entire respiratory muscle system. With increased breathing work, the duration of this pause is admittedly shortened, but the relaxation phase and quality should remain. Exercises for perception and extension of the pause in breathing serve, besides reduction of hyperventilation, the elimination of tension. They will also make the respiratory muscles more flexible and more economical in their use. This process can be extended to other muscle groups by means of motions carried out in basic rhythm.

Deepening breathing is either achieved by body motions which have a direct effect on respiratory mechanics, or by stimuli which activate the respiratory centres and thus increase the volume of each breath taken. We use such an inhalation stimulus, for instance, by extending exhalation. Prolonged exhalation and the subsequent pause cause carbon dioxide levels in the arterial blood to rise. As a result the respiratory centres in the brain are stimulated to deepen the subsequent inhalation. Extension of exhalation can be achieved both by articulation resistance as well as by using the phonetic resistance during speech and singing.

Voice

A further path to human and musical regeneration according to Schlaffhorst-

Andersen, is the production of sounds in which sound functions are consciously used to set large parts of the body into vibration. This further constitutes a compensating effect on sympathetic nervous arousal. This, together with emotional causes is explained by the close link of the visceral nerve (*nervus vagus*) to the external auditory meatus and the eardrum (1). At the same time by making sounds and by lengthening exhalation, deeper breathing is facilitated (see above).

Basic Cognitive and Emotional Components

Psychological compensation of sympathetic nervous arousal is additionally accomplished via positive images (such as visualisation of relaxing, rhythmic and slow processes) - developing individual cognitive strategies for blocking out conditioned memories and by - converting the enormous tension in the performance situation, normally perceived as destructive, into one which is constructive and functional to performing music. Visualisation and 'training for the real emergency' help the musician to familiarise himself with the location, situation, cause of fear and motivation. The musician also works out individual tactics to enhance this so-called 'home advantage.'

The Schlaffhorst-Andersen concept is not a simple relaxation process. It is rather a motion exercise, training sensory motor nerves and a programme for regeneration of the human being - in and outside of performing situations. Thus at the start of the programme, after taking stock of the individual problems, the focus is on intense training in the functions mentioned above. Review of the results of exercises and recourse to audio-visual media are part of the training. In the course of training, media and accompanying body motion are constantly reduced and the level of challenge is raised ('training for the real emergency') when the musician can try out new postures in the sheltered environment. Ultimately, uncomplicated images as well as the body consciousness and memory already achieved suffice to regulate the sympathetic arousal so that the concentration can be channelled into the music. The trained musician can now immediately react whenever he perceives signals of heightened adrenergic tone and sympathetic arousal (e.g. obstructive tensions or acceleration of breathing and pulse) during a high stress performance. He

has learned to influence them actively in a positive way and can prevent a vicious circle which results in anxiety. The musician has learned to stay within an established rhythm even at high levels of tension and energy instead of yielding helplessly to his own inner chaos. The musician can allow for and utilise releasing elements and, thus, according to the music, experience the shift from tension and relaxation. He is now more capable to stay with the flow and remain focused in relation to both music and motion. An artist who is centred in his own perception and has the tool of regulating his central functions is in control of his behavioural modes. He is not at their mercy and his consciousness increases in the literal sense. Possibility of failure is reduced and stress resistance on stage is improved which usually affects his daily life.

The Schlaffhorst-Andersen concept thus provides a programme especially tailored to the needs of musicians. It integrates all the constituents of the reciprocal actions of cognitive emotional, vegetative and motor functions into a treatment of performance anxiety. It thus, offers assistance for professional musicians, music students, music teachers and all those who music in public.

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Voice and the Physical Performer

by Hilary Jones

Voice Lecturer at the Royal Scottish Academy of Music and Drama.
She also works as a Musical Director and Director.

In 1997, VASTA, the American Voice and Speech Teachers Association, published a collection of essays by 24 leading experts which explored; a number of issues with the common theme focussing on the changing role of voice in performance. As a Vocal Coach who spends as much time "undoing" and "doing", I was particularly interested in "Voice in a Visual World" by Robert Barton. His definition of the voice specialist as being:

"All too frequently, vocal directors are not brought into the production process until midway or towards the end of the rehearsal process when 'suddenly' the actors voices present a problem for the director. If the vocal director accepts such an assignment, he is forced to function without a thorough knowledge of the play's text, the director's concept, the actors' discoveries within a rehearsal process or the production designs. It is to say the least, a difficult and frustrating position in which to find oneself in the theatre."

These statements imply that the current role of the vocal coach is viewed as supplementary rather than integral to the production process. We may see ourselves as "artists in the theatre" but unless we are involved at the outset, the role is frequently relegated to "fixing little hurts."

As a performer who suffered physiological problems brought about by inadequate technique, much of my own teaching work has been concerned with what happens when the performer "malfunctions". The phenomenon of "Stage Fright" has received wide media coverage in the past twenty years and much has been done through the aegis of organisations such as ISSTIP and BAPAM to disseminate information and actively pursue methods to combat the associated problems. Advances in medical technology, the advent of micro-surgery, endoscopy and arts psychology would all suggest that we now have a firm grip on the subject, but endless shelves of books with titles such as "Freeing The Natural Voice", "The Right To Speak", and "The Confident Performer", might suggest otherwise. So, what are the factors still influencing – and possibly culpable for – the

continuing problem of performance stress?

The Conservatoire Tradition

No one would deny the evolution of theatre during the past two decades. Radical and constant changes in the field of tertiary education and the need for conservatoire training to incorporate the university degree has also seen major (and some might argue detrimental) constraints placed upon the training of performers. Andrew Wade, Voice Coach to the RSC also points out that the recognition of voice as the key element in training actors has suffered a certain demise; whereas the great British conservatoire tradition was founded and run by voice specialists such as Gwyneth Thorburn, Rose Bruford, Elsie Fogerty and Jean-Norman Benedetti, the 1970's and 80's saw the tiller taken by Directors and in the 90's, guardianship has been given to the financial administrator. Artistic integrity has become the victim of economic necessity.

Audience Expectation

Then of course there is the issue of audience expectation. I quite deliberately entitled this paper: "Voice and The Physical Performer" because it is increasingly apparent that the "straight actor" has become as mythical a creature as the Dodo. In the past, opera singers were expected to display only their superb singing voices; dancers did just that – and actors were primarily responsible for speaking and characterising text. Nowadays the opera singer is expected to act, the dancer to sing and the actor to do all three. And we have also created an entirely new breed – "the contemporary theatre performer", whose exploration of their art requires them to display in ever more extreme scenarios from community centres to shopping malls, from building sites to the top of building cranes – spaces that were never designed the way that traditional theatres supposedly are – for the voice. Modern audiences whose appetite for spectacle has been whetted by the rise of the musical demand over more stage pyrotechnics. Even plays that were

written at a time when the word "technology" barely existed in the *Oxford English Dictionary* – such as JB Priestley's "An Inspector Calls" – involve a range of special effects all for the benefit of the visually ravenous theatre-goer. Epithets and accolades emblazoned across posters proclaim: "This show is a must-see", "Sumptuous spectacle", "an orgy of colour and excitement" – all clearly referring to the plays visual excellence. Somehow "Joe Blogg's handling of the iambic pentameter is legendary" as a headline, fails to excite.

As Kirstin Linklater so succinctly put it: "The eye is eating the ear".

Now I'd be the first to applaud innovation and experimentation in the theatre. Despite the frequent headlines heralding the demise of the art form there is still a demand. Out of necessity and in competition with film and TV, theatre has evolved to incorporate the major technological changes of the past decade; stage machinery has been revolutionised by shows such as "Martin Guerre"; digital technology allows the recreation of helicopter airlifts out of Vietnam – indeed entire theatres have been rebuilt to house a particular show (Cats, Starlight Express) and many "houses" have space that can adapt to the demands of specific productions (The Tramway and Fruitmarket in Glasgow being two obvious examples).

But somewhere amidst this miasma of image and effect sits the actor whose job description may require that he roller-skates whilst singing (Starlight Express), sings while descending into a tank of water (Brith Goff), scales the roofs of Covent Garden whilst playing the saxophone (Urban Sax) – the list continues. From the performer's point of view such physical feats may (and often do) require constant "maintenance visits" to the osteopath or chiropractor and in extreme, though not unusual cases, render the performer unfit for future performances. If we now have a situation in this increasingly litigious age where paramedics can sue the ambulance service for post-traumatic

stress disorder suffered as a result of their job, it cannot be long before performers issue claims for the stress, both physical and psychological induced by the profession.

It is essentially the visual nature of current theatre that poses the biggest challenge to the Voice Coach and which has redefined our role as "sticking plasters". And subsequently we must ask the following questions:

1. What is the responsibility of the Director to the actor in translating his vision?

2. Are we equipping actors with sufficient technical skills to enable them to respond to directional vision?

The continuing education of the Actor

As trainers and coaches, we constantly attend courses and workshops in order to enhance our skills and stay ahead of the game. It is extremely unlikely that we only use those methods received during our initial training. Actors undertake a three (sometimes four) year training programme. On graduation, if they are fortunate, they will be employed in a regional theatre or have an agent who secure them small parts in a TV soap or serial. The tradition of the Theatre Repertoire system which was always viewed as an apprenticeship with older more experienced actors mentoring the newcomers, has virtually vanished. The Actors Centres were established in response to this decline and offer a variable range of "top-up" workshops to promote further skills acquisition. But the average actor, whose work record will be erratic is often not so much resting as in complete hibernation. Yet vocal and overall physical maintenance is essential if the "instrument" is to be kept in working order. Actors must be able to respond to the ever-changing demands of the profession and recognise that a "vocal warm-up" is NOT three fags and a cup of coffee).

TV versus Theatre

A different but ever increasing problem is the actor who, having had a long running stint on TV suddenly finds himself back on stage – and in trouble. The voice has been insufficiently exercised, the myth being that the microphone is doing the work. The memory that theatre requires a sustained vocal delivery (with no re-takes) can send the actor into a blind (vocal) panic; the ability to project the

voice has been forgotten and the glottal attack/constriction that occurs in an effort to compensate for a lack of volume can cause severe vocal dysphonia.

These problems could largely be addressed by (re)education and radically alter our approaches. It is "easy" to free the voice in voice class and to learn the routine in a dance class. The problems arise when the actor needs to synthesise the skills, and yet cross-disciplinary team teaching is undertaken sporadically, if at all. The actor who may have adequately understood the exercise when guided by the tutor in class, may still undergo real difficulties when incorporating the different disciplines on stage and it is during this part of the process that the voice coach becomes invaluable. There is also a need to recognise that much of the training often takes place in "unrealistic" spaces; there is limited value in teaching big voicing techniques if the students only ever get to practise in rooms the size of the average lounge. This is perhaps an area where the theatres themselves could support acting training in more pro-active way. Surely there should be some level of interaction between drama schools and nearby theatres particularly that some of them are often unused for weeks at a time.

And it is not only in the training of actors that we need a radical re-think but in the training of directors also. The last five years have seen the advent and rise of formal director training and yet how many such courses include an overview of the role of the voice or the importance of acoustics?

In recent years, I have been privileged to work with theatre companies in Australia, Istanbul, Singapore, Romania and Poland and the diversity of disciplines has allowed me to question whether the problems of performance stress are specific to our culture and training or more generic. My conclusion is that the problem is a human one and that the solution is also in our own hands. The attached chart tables present some of the most common factors responsible for the actor experiencing vocal difficulties; so many of the solutions are commonsensical but are usually ignored or unrecognised. This is where the voice coach becomes essential. Our role extends beyond that of accent/text coaching and, as Robert Barton's statement implies, borders on the diagnostic. Being called upon as a last resort to "fix the little hurts" is a warning

signal and directors must take some responsibility for exacerbating performance stress. Too often the actor is looked upon as an expendable item (hey, with 80 per cent unemployed, bring on the substitute) and there is often little understanding or concern for the physical hazards that may be imposed. Actors themselves must take responsibility in maintaining and extending their skills, the confidence in their technical ability and the resources to analyse and find their own solutions which would go a long way in eliminating unnecessary levels of tension.

The Voice Coach is uniquely qualified to "enable" both the directors' vision and the actors' interpretation of that vision. Where there is genuine dialogue, there is total creativity.

At the beginning I quoted Robert Barton, and I would like to conclude with the entire quote:

"Voice specialists are often mistakenly regarded as first aid kit staff with bandages and ointment to fix little hurts. Given the shifts in our society, we must now regard them as Warrior Healers, the stewards of vocal life and ultimately, those charged with its very survival."

This transcript is based on a paper presented at the National Voice Centre, Sydney University, in August, 1999.

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The Vocal Coach Check List

1. THE THEATRE

	<i>Check for</i>	<i>Potential problems</i>	<i>Solutions</i>
Stage	Raking/traps/obstacles	Loss of centre	Actor experience
Design	Prosc. Arch/In the round/ 3-sided, etc./audience participation	Inaudibility especially if actor is working in promenade situation	Acoustic training/use of projection/hard surfaces to reflect voice.
	Scene shifting whilst actor speaking?	Actor masked by noise	
Effects	Dry ice/strobes/smoke machine	Coughing/dryness	Drinking water at side of stage
	Lighting	Low lighting levels influence audience ability to "hear"	Actor awareness
	Flying	Flying harness may result in tension	
Acoustics	Dead spots/echo/pre-recorded sound/use of microphones/live music	Inaudibility Imbalance of instrument to voice	Rehearsals to explore and counteract these. Use of microphones for both band and cast
Environment	Is the theatre particularly dusty/humid; dressing rooms damp/unheated	Drying out of vocal folds Actor put at risk of colds/sinus problems if dealing with constant temperature change	Humidifiers Common-sense solutions; actor to take responsibility for ensuring body temperature stays constant

2. THE ACTOR

<i>Costume</i>	<i>Potential problems</i>	<i>Solutions</i>
Period/historical	Winged collars/corsets may restrict breathing mechanism	Technical exercises to counteract this/actors to rehearse in costume <i>asap</i>
Hats/Wigs/moustaches, etc.	Additional weight on head restricting movement and facial hair can alter point of tension (accents)	Ensure actor comfort; early practice with costume
Shoes	High heels/platforms, etc., will alter body balance	Actors to work on maintaining postural alignment/using shifts in centre to enhance role
Masks	Constriction of head and neck leading to inaudibility/reduced sight-lines	Re-design where possible. Actors to work with masks <i>asap</i>

2. THE TEXT

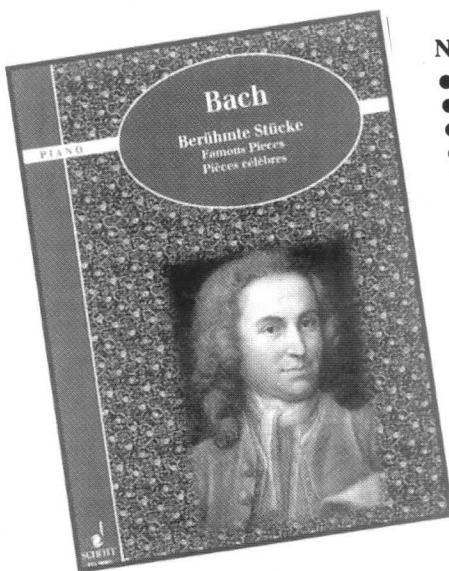
<i>Element</i>	<i>Potential problems</i>	<i>Solutions</i>
Accents/dialects	Does play require multi-accent Convincing the audience whilst maintaining an authentic sound	Warm-up to incorporate dialect drills
Verse/poetry	Heightened language subsumed, rhythms sacrificed to sense	Thorough knowledge of and confidence in handling verse
Heightened language	Over-pitching	Awareness of acoustics
Intense/intimate emotions	Overuse of glottal attack/inaudibility Vocal damage more likely if screaming used and acting technique is poor	Awareness of volume levels: Use of anchoring, etc. to enable safe voice use
Actor unable to sustain text/erratic vocal energy/struggling to control breath	Insufficient technique; often a result of actor working predominantly in TV	Better initial training/use of appropriate techniques/energy games and acoustic awareness

The Vocal Coach Check List ~ continued

4. THE DIRECTORS "SPECIALS"

Requirement	Potential problems	Solutions
Actor to consume food on stage	Some food stuffs such as milk/chocolate can cause an overproduction of mucus causing actor's voice to sound thick	Awareness and substitution, i.e. watering down milk, soya based chocolate
Smoking	Irritation of vocal tract	Use of sirening to "cool down" and increase of fluid in-take
Unusual and restricting postures	Actors voice working under unnecessary stress – can lead to vocal damage	Release of constriction; use of Alexander Technique/Feldenkrais to allow actor alternatives

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Book Reviews

Medical Problems of the Instrumental Musician

Edited by R. Tubiana and P. Amadio
Martin Dunitz Ltd.
ISBN 1 853176125

"A musician is a goal-orientated individual who feels that his art takes precedence over his physical condition."

This aphorism, one of many scattered throughout this new and important book is fundamental to the whole specialty of musicians' medical problems and is, indeed, the reason for its development. Performing musicians suffer for their art and the race for betterment and achievement starts early, with the refining and honing of technique to perfection. Hours of practice lead to the development of pernicious habits of musculoskeletal imbalance, themselves heightened by performance stress. More performance means more practice, with the pernicious habits flourishing – ultimately to a point where pain and malfunction make playing impossible, no matter how many compensatory tricks the performer may develop. Musical instruments are not ergonomically safe, and so every performer is at risk. The performing musician resembles the athlete in that both are public performers whose careers depend on success. The athlete is pampered by daily contact with physicians and trainers; the musician works alone, until such time as he chooses to recognise that all is not well and that he must seek help. Such recognition may fly in the face of concert commitments and an assured artistic and financial future, and may come almost too late. There are, of course, some musicians for whom the instrument is almost an extension of their physique and who seem immune to such problems; one thinks, for example, of violinists such as Heifetz and Elman, for whom the violin was another limb. There are, sadly, others whose careers were blighted by these problems and one thinks here of great artists such as Gary Graffman and Leon Fleisher. Indeed, the book includes Graffman's own account of his problem – and three other prominent musicians, including Michel Béroff, describe the genesis of their difficulties and their response to treatment.

The book also includes the American neurologist Frank Wilson's fascinating essay on "Glenn Gould's Hand", with a detailed discussion on Gould's probable focal dystonia – in which Wilson comments that "diligence can turn into disaster, and a highly skilled hand is rehearsed into wreckage", possibly the most vivid of the book's many aphorisms and one applicable, with modification, to almost all performers on any

instrument. Prevention, then, must be the name of the game with both teacher and pupil aware of the problems both potential and actual, and of access to remedial resources. It is, surely, criminal to allow the development of a young player with a fabulous technique only for him to be destined, inexorably, for self-destruction in a few years – and this, of course, is where a teacher mindful of such problems may be fighting a losing battle against the commercial pressures driving such a pupil ever nearer to that destruction.

Awareness of musicians' problems has dawned only slowly over many years, and treatment has all too often been simplistic and haphazard. Over-use has battled with mis-use, and treatments have run the gamut of rest, physiotherapy, analgesics, anti-inflammatories, tranquillisers and beta-blockers. Gradually, however, a knowledge base has been established thanks to the work of organisations like the **Performing Arts Clinic** run by the International Society for the Study of Tension in Performance at London College of Music and Media, (co-directors Pamela Bowden and Carola Grindea), the **British Association of Performing Arts Medicine**, and also the work of **Amabo**, the Medical Advisers, appointed to several British orchestras. Treatment has become rationalised, soundly based on functional anatomy and ergonomics with a proper use of investigations and a "whole person" multidisciplinary approach to the musician and the problem. With this, the subject has emerged as one of the disciplines of medicine – a specialty in its own right, with a rapidly expanding literature to which can now be added this new and authoritative text. It is edited by two surgeons (both specialists in hand problems), Raoul Tubiana from Paris and Peter Amadio from the Mayo Clinic, Rochester, New York, and must be regarded as the definitive text on the subject. New editions will appear, as will other books, but this is a landmark. It presents specialist contributions from neurologists, anatomists, surgeons, physicians, ophthalmologists, physio-therapists, psychologists, stomatologists – as well as musicians. It covers problems ranging from carpal tunnel syndrome to focal dystonia, from postural disorders to stage fright. The chapters are detailed, succinct and well illustrated, and each has a huge bibliography. Repeatedly, one is struck by the importance of a truly holistic approach to a musician's problem – as described in Christopher Wynn Parry's chapter on "Clinical Approaches". One deals, not with a painful hand or joint attached to a musician, but with a person in pain whose problems are all too often multifactorial – physical, emotional, environmental – and so

a detailed and sympathetic history in keeping with such an approach must be taken. Investigation, diagnosis and treatment are the results of a multidisciplinary approach – with treatment taking, increasingly, the form of a slow and meticulous rehabilitation and re-programming, and it is interesting to note the extremely conservative approach of the surgical contributions. The essential unity of the skeleton, as a dynamic whole, is emphasised, pointing to the relationship between the various parts of the musculoskeletal system. A correct spinal posture is fundamental to correct function for (yet another aphorism) "proximal postures may affect peripheral function."

The book is highly technical, and is *about* – rather than *for* – musicians. There are, though, chapters which every musician could read with profit, including Aynsley Smith and colleagues on "The Psychology of the Musician"; Stephanie Brown on "Promoting a Healthy Keyboard Technique"; David Weilenstein and Christopher Neal on violin technique, and André-François Arcier on stage fright. In the end, though, it is for specialists, a text to which all concerned with musicians' problems should have ready access. The editors, contributors and publishers deserve heartiest congratulations on its production – and at least one physician wishes he had been taught functional anatomy as presented in this splendid book.

Dr. Michael Lasserson

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Mind and Muscle: An Owner's Handbook

by Elizabeth Langford

Garant 1999 £17.95

ISBN 90 5350 883 X

The title of this book aptly conveys its contents. It explores the connections between our thinking processes and how our muscles work in two related ways: the effects of our often mistaken ideas about our own anatomy and physiology on how we function (F. M. Alexander's "erroneous preconceived ideas"); and the effects of accurate concepts guiding clear ideas about what we want to happen and not happen (F. M. Alexander's direction and inhibition). This is a substantial book, written by a very experienced Alexander teacher who has clearly thought long and hard about the subject, and experimented with ways of communicating the information to pupils. It begins with sections on body-image; the triangle of use, structure and function, muscles - what they are, how they work, how they organise the framework of the body; and how our moods and choices influence our muscles. Then a section deals with the two ends of the body vital for balance, the head and the feet. This brings in the relevance of head balance as we understand it in the Alexander Technique, and allows room at the other end for some pithy comments on the silliness of such footwear as exercise sandals and negative-heel shoes. Also in this section is an invaluable chapter on breathing, covering some of the widespread fallacies on this topic, e.g. *abdominal breathing*, beautifully (and deliberately) described in the book by a friend of the author's as "abdominal breathing". Ms Langford points out how many misguided attempts to improve breathing are stimulated by the effort to correct breathing itself, without noticing that the real problem is the collapsed or distorted framework of the body within which the breathing is taking place.

Further on the book goes into how the arms and legs relate to the central column of the

body, leading into aspects of bending, walking, running, and the many ways we use our hands. Then some useful comments and advice on chairs, beds, and other equipment; Repetitive Strain Injury; exercise, with a valuable untangling of the different types of exercise for different purposes such as cardiovascular fitness and muscular strength and flexibility. And finally the difference between habits and reflexes; and the muscular aspects of fear reactions. Incidentally, it might have been helpful in the section distinguishing reflexes from habits to warn the reader that Alexander, in his books did not follow this distinction. He often used reflex as a synonym for habit, a more common English usage in the earlier part of the century, as in the phrase "habitual reflex activity" used in *The Universal Constant in Living*.

The last section, on muscles and fear, illustrates one of the most admirable features of this book. When thinking about how to review it, I at first thought to put in a few direct quotes from the book to allow its quality to speak for itself- and perhaps save myself some time and mental effort! However it is difficult to find appropriate short quotes. Not because the writing is at fault: it is clear, lively and well expressed. But there are no sound bites. In other words, when dealing with difficult, complex subjects Ms. Langford does not settle lazily for the easy oversimplification. For example, in dealing with fear reactions she avoids the glib assumption sometimes heard in Alexander circles that the Startle Pattern underlies all "pulling down". Instead we are given helpful observations and speculations about the relationship between infant alarm responses like the Moro reflex and the adult startle pattern, suggesting that the adult response may be an unconscious attempt to partially prevent the infant one, momentarily trapping the adult in two contradictory movements. To further allow for the complexity of real-life situations, the author then suggests a "slow motion" form of the reaction, brought on more by worry than sudden alarm. And all this is linked to why the performing arts have

been such a fertile field for the Alexander Technique.

So just one quote: "However, no amount of correcting, pretending, or 'good posture' will have the same effect as a series of personal decisions genuinely not to do the things we know are self-destructive. I think the need for this silent turn-around is one of the biggest challenges facing humanity today, and one in which we each have a part to play, a part that cannot be played by anyone else."

All the way through, the anatomical and physiological information is clearly presented, accompanied by excellent drawings and interesting photographs. Each section includes what the author calls "Experiments". These are suggested movements to bring about practical experience of the anatomical information which makes it real, enhancing body awareness instead of just being theoretical knowledge.

I would advise that you read this book slowly, one section at a time, and play around with the experiments. Put it down and then come back to it a few days later to continue with the next section. It is not a light read in the sense of something you can skim through in a couple of evenings, but it will repay careful reading and re-reading and enrich your understanding of how the Alexander Technique works.

One criticism in relation to the above: a book of this length and richness of information really should have an index so that you can quickly find and re-read passages of interest. Publisher please note!

This book is a thoughtful, thorough exploration of the subject that provides a bridge between Anatomy and the Alexander Technique. I recommend it to all teachers and training course students, and to anyone who wants to understand more about how the bodymind works and how its functioning can be improved.

John Nicholls

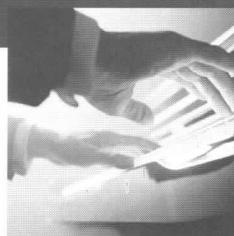
Alexander Technique Teacher

*This article has first appeared in "Statnews"
January 2000*

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Taking Centre Stage

How to survive and enjoy performing in public

by Ruth Bonetti

Albatross Book

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"How to survive and enjoy performing in public" is the sub-title of Ruth Bonetti's book, and in it she proceeds to show her readers how this can be done. An Australian clarinettist, teacher and author, Bonetti has written a most useful book, full of common sense, based on her own experiences as performer, teacher and lecturer, so that the many musicians incapacitated by fear of performing start thinking differently about their plight – knowing that "they are not alone". Her anecdotes about great artists admitting their "inner Hell" before going on stage are convincing enough to bring home the truth about being a performing artist, with all its fears of failure, apprehensions, anxieties, and at the same time about the satisfactions and the real thrill when one succeeds. Her study is addressed to all type of performers – musicians, dancers, actors at various levels – whether professionals, students, teachers, amateurs.

She divides her study into four parts:

Part A – The Problem – "the Fear" which she considers the main cause of failure. She

analyses it from as many aspects as possible, discussing the *fear of being afraid*, giving sound ideas on how one should approach this problem, face and accept it and how to cope with it.

Part B – Solutions

She believes that only a thorough preparation can result in a satisfactory and satisfying performance. Here again, Bonetti is master of her subject, giving healthy advice on "how to prepare for a confident performance". She includes clear ideas on *physical preparation* – a good posture is a paramount condition, learning techniques of relaxation to control the muscles in different parts of the body and she also gives sound breathing exercises to maintain freedom of breathing while practising and when playing in public. She then emphasises the importance of a right *mental preparation*: to adopt a positive attitude instead of always thinking "my friend plays that piece better than me". Students and teachers should find of real value her detailed and systematic approach to learning difficult passages, using the "block-building" method. This means dividing the passage into small units of a few notes; practise the first "unit" very slowly, gradually increasing the speed; add one or two more notes, and repeat the process until all the notes of that passage have been mastered. To commit the music to memory, she recommends to study the music away from the instrument and *play the piece or pieces mentally*, being aware of the

involvement in the music which one wishes to convey to the listeners. "Creative Imagery" is another strategy recommended by Bonetti in the preparation for a confident performance.

Part C – deals with Specific Situation which musicians and other performers find themselves in, no matter how well they thought they were prepared. Wrong notes, squeaking instruments or other unexpected mishaps occur. How to handle such failings? Ruth Bonetti reminds her readers that this can happen to the greatest and the most accomplished performers. Even Liszt hit a wrong note occasionally, but he could plunge immediately into new harmonies, with his usual panache! The ability to improvise is invaluable in such moments.

Part D – is concerned with The Reward, that unique moment experienced by the artist when his performance reaches extraordinary heights, when the audience and the artist become ONE. These are the moments which make all the effort worthwhile. Every player will admit that there is no greater satisfaction than having done one's best.

Carola Grindea

This article has appeared in Piano Journal, No. 61, Winter, 1999.

Music and Muscle :an owner's handbook

In a school where the author used to teach, a pupil once remarked: "Oh, I see God did a good job of making us, but forgot to put in the handbook." Here, at last, is the missing guide. Written in everyday language, it gives us the facts about the intimate links between thoughts, emotions and muscle behaviour, and shows us, in detail, just what principles really underpin good functioning.

All these factors, which Elizabeth Langford explains with such simplicity and clarity, have been known for many years, and are taken for granted by the true experts in this field. However, expressed in the technical language of specialist journals and scattered throughout volumes of reference, they have not been available to the public at large. *Mind and Muscle* performs the vital service of making this material accessible.

Progressively, the reader is invited to enter into the practical reality of this information and to experience its benefits. This is a book that will be invaluable to anyone whose working tool is their body – whether athlete, musician, dancer, dentist or carpenter – and who is looking for improved performance or simply for less strain: for those who are convalescent or battling with a handicap; for the many people suffering from that ever-increasing problem - back pain; indeed for anybody keen to rediscover a sense of well-being.

Elizabeth Langford, a professional violinist and a pioneer of the use of the Alexander Technique in music education, was the first of her generation to be authorized to train Alexander teachers. She is a former Chairman of the Society of Teachers of the Alexander Technique, and the current President of its affiliated association in Belgium.

"...respects the natural functioning of the body...certainly has a place in health promotion"
VIGoureas (*Journal of the Flemish Institute for Health Promotion*)

"...delighted that the research and all the hard work has come to such a magnificent and useful conclusion.
The book will be of enormous use to us here at the British Performing Arts Medicine Trust"

Mind and Muscle: an owner's handbook / Elizabeth Langford - Louvain: Garant, 1999 - 253 pages, 75 illustrations (line drawings, anatomical drawings, photographs) - ISBN 90-5350-883-X £17.95

Distribution: Central Books (UK); Gaunt (USA); MAKLU, Antwerp (rest of the world)

Marie Jaell

Pianist, Pedagogue, Scientist, Philosopher

by Miriam Jorion

Pianist and teacher and Mons University, France

MARIE JAELL was a highly celebrated French pianist during the second half of the 19th Century and the early part of the 20th Century. When only 20, she married the pianist Albert Jaell and both were launched onto a remarkable career as soloists and as duettists. They were part of the intellectual and artistic set of Paris and their home soon became a notorious Salon, where well known artists, musicians, writers and scientists gathered, among them Liszt and Albert Schweitzer.

A child prodigy, Marie Jaell gave many concerts in Alsace where she lived with her parents. When she was accepted to study with the renowned pianist, Moscheles, her parents sent her to Paris where she entered the Conservatoire. She was not only an outstanding pianist but also showed great talent for composition and her masters, Cesar Frank and Saint Saens, thought very highly of her works. They actually encouraged her to publish several compositions which appeared in 1871 at a time when women composers had no place in the profession. Liszt was so impressed that he remarked: "If these compositions appeared under a man's name, they would grace every piano".

The Jaells travelled throughout France and Europe, as far as Russia and wherever they went they were received with great acclaim. Marie was not content with spending so much time travelling and performing. She had an inquisitive mind and was an avid reader, greatly interested in the philosophical and artistic trends of the time. A bout of depression followed and when she got better she became involved in a spiritual search into the meaning of her existence as an artist, looking for new directions. She realised that only through knowledge could she find some answers to her quest.

At the time, new ideas were expounded by great theoreticians of piano thought, among them Ludwig Deppe and Breithaupt in Germany and Tobias Matthay in England who published their findings in the field of the physiology of piano technique. *Relaxation and use of arm-weight*, became a by-word together

with other factors concerning the many aspects of piano technique and piano playing. These had a profound effect on Marie Jaell's own playing and teaching. She analysed and re-assessed her own playing and her pedagogical attitude and she became fascinated by the mysterious ways in which rhythmical energy and artistic movements became integrated with all the senses. At the same time she became more and more concerned with philosophical and aesthetic concepts in her search for a conscious awareness of the self, and the individual within the existentialist ideas of love, life and death as part of the human experience.

The death of her husband, Albert, when she was only 35, was a great shock for this highly sensitive artist. The loss was too traumatic to carry on with her career. She left Paris for Weimar, to be near Liszt, her mentor and friend. She became his assistant, occasionally acting as secretary, while at the same time she continued to perform and compose. Working closely with Liszt brought new dimensions to her playing and to her compositions but more so to her scientific studies. On his part, Liszt showed his admiration for Marie by dedicating the 'Mephisto Waltz' to her.

Liszt's death, in 1886, left an immense void in Marie's life. She withdrew from public performances devoting herself to further scientific and philosophical studies. However, before retiring, she offered her homage to her revered master and friend. She gave a final, public concert of the integral works of Liszt, a feat never attempted by another pianist apart from Liszt himself. This prompted Saint Saens to comment: 'There is no one in the whole world who can play Liszt's works like Marie Jaell'.

Marie returned to Paris where she was encouraged to make her ideas known. She published a piano method and several books in which she expounded her theories which were quite new and controversial: 'The Touch', 'Music and Psychophysiology', 'The Intelligence and Rhythm in Artistic Movements', 'The Rhythms of Vision and Fingers Dissociation'.

The complex psycho-physiological factors were further analysed in her continuous effort to bring more clarity in the study of 'Touch' and the diversity of sounds, colours and nuances which illuminate a performance.

Here are some of her main ideas.

The 'education of the hand' is fundamental if one is to achieve the education of the brain. In her view, educating the hand means developing its functions according to the laws of nature. She calls a 'dissociated hand' when each finger becomes an individual entity which achieves independence through muscular contractions leading to harmonious movements. The musical expression is transmitted to the keyboard through these harmonious movements and the tactile sensibility is directly related to musical sensibility through the mental imaging of the movements and of the muscular tension.

In her teaching she advocates a 'sliding motion' of the finger when pressing the key. The finger is gently pulled towards the palm. This gliding of the finger should be as light as possible to develop elasticity and sensitivity of touch, avoiding the slightest resistance or stiffness in the hands, wrists or arms. She also talks about 'circular motions' of the hand for more freedom which were based on Liszt's teaching in later years.

In her own playing she found a low chair or stool during practising more suitable to develop an awareness of the muscular tensions needed to produce the tone or tones, but, when performing in public she recommends to sit higher, with elbows raised above the keyboard, to allow greater freedom of arm movements.

To develop the inner ear, she suggests very slow practising, in 'piano' or even 'pianissimo'. This allows moments of repose between phrases which in turn, bring repose in the mind. The pianist can then think ahead and plan how to play the next note or notes as he hears them in his imagination.

Jaell is constantly concerned with quality of tone, colours, the diversity of an artist's palette of sounds and believes that a true consciousness of

beauty implies a profound knowledge and understanding of the functions which serve to create them. She talks about 'thought which becomes an extension of the sound', and 'an inner rhythm which permits it to connect with the following sound'. *The thought becomes rhythm and the rhythm guides the movement.*

The hand develops its own creative thought and that is why every tone must first be heard in the 'inner ear' prompting the movement to express it. The 'active' movement of the hand then works in co-ordination with the mechanism of the piano and this results in sonorities of the finest quality, expressed with great freedom. All the senses are alert, they interact and transcend each other, a process which Marie Jaell describes as 'learning to listen to the body and the hand' while becoming more and more aware of its movements. *This association of the functions of the hand and the consciousness of its movements in accord with the mechanism of the piano constitute the basic principles of her teaching.*

She combines her scientific approach with a philosophical search in her analysis of the psycho-physiological functions of the hand and fingers, their tactile sensitivity, the workings of the muscles, how they act and interact. Science and consciousness are merging, cerebral and muscular concentration combine with the harmonious movements of the pianist's supple arms, hands and fingers to bring about an artistic performance. In her views, an artistic execution and the

notion of what art is are the result of a conscious process, well thought out and thoroughly prepared.

Rhythm remains the great source which gives life to any artistic performance. She is fascinated by its power in nature, the tree standing strongly rooted in the earth while the branches and leaves move in a logically established rhythm. It is the same with our body which is affected by external influences as well as by the inner emotions. These ideas are developed in her book "Intelligence and Rhythm in Artistic Movements". Moreover, the performer becomes aware of rhythm as a creative element, transformed by the conscious thought through visual and aural perception of the musical writing and its nuances. *At this moment he is both the creator and the artist.*

Imagination and sensitivity play their part in developing a greater consciousness of the world around us. *Jaell uses colours*, especially those of the solar spectrum, suggesting that by imagining a different colour for each finger, for instance red for the index, orange / yellow for the middle, green for the ring finger, blue for the fifth and purple for the thumb, one may create a greater refinement and variety of touches. She also experimented with different surfaces of each finger to produce different sounds.

Thus the finger tip produces a different sound than the one created by the pad under the nail.

Marie Jaell was a visionary. She has attempted to put into words her pedagogical principles, her scientific

searches, her artistic experiences and the philosophical ideas in her constant endeavours to elucidate the complex mental, physical and physiological processes in piano technique and in the artistic execution. She devoted her entire life and work to this ideal.

Her concepts did not gain the recognition she deserved during her life time perhaps because these were too advanced and she may not have found the right way of presenting them to the pianists and teachers of that time. Yet, in later years, outstanding pianists were greatly influenced by her work, among them Pierre Sancan, professor at Paris Conservatoire, Eduardo del Pueyo, professor at the Conservatoire Royal in Bruxelles and the legendary Dinu Lipatti.

Many younger pianists found her approach as taught at the 'Marie Jaell Institute' in Paris (6, Rue Philippe de Grand, 75010 Paris) of real value both in their teaching and in their own playing. I myself, had the privilege to have studied there.

Unfortunately, most of Marie Jaell's books are out of print. This is a serious loss considering that more and more pianists are suffering from physical problems and injuries and Marie Jaell's findings could be of great help.

It would be good if her books would be re-issued and made available in music libraries and in music colleges so that a larger number of students, teachers and performers could peruse them. This might contribute to preventing such problems.



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How can kinesitherapy help to prevent and cure musicians' problems?

by Fançoise Denayer

Kinesiapist at the Clinic of University St. Luc, Belgium

KINESITHERAPY (the Continental term for Physical Therapy) is frequently used not only in medical cases such as paralysis after a stroke, injured limbs or other parts of the body after an accident, bone fractures demanding physical re-education, but also in dealing with occupational problems of instrumentalists due to misuse of their muscles and joints.

More and more musicians seem to be afflicted by physical problems or injuries, sometimes experiencing great pains in the playing apparatus or in other parts of the body. In cases of *focal dystonia*, the instrumentalist's hand stops functioning, either getting into a cramp or one or two fingers curling under the palm.

These dysfunctions can only be dealt with through a thorough process of re-education, a re-programming of the entire motor-sensory system.

I became interested in the field of "Music Medicine" and had the opportunity to work as a kinesiapist together with medical specialists such as orthopaedic surgeons, rheumatologists, neurologists, psychiatrists and psychologists who were involved in helping musicians with their various physical and psychological problems.

The role of a kinesiapist is a dual one: helping the instrumentalists with an existing problem, or using a method which will prevent such dysfunctions.

Unfortunately, instrumentalists, unlike dancers or athletes, go to the doctor or the kinesiapist only when they are in pain! Therefore, I work mostly with problems which have already set in.

The first session consists of a short interview to find out as much as possible about the person, the psychological state and attitude to understand the reasons for coming to me; this is followed by a physical analysis of the posture, the position and state of shoulders and other joints, the way she/he functions, which movements create tensions or pain, and many other factors. Only after such an analysis will the kinesiapist be able to establish the cause of the condition and recommend a particular type of therapy.

If the therapist considers the problem to be of a physical and physiological nature, the patient will be made to realise that the treatment will consist of a "de-programming" of the incorrect usage and a "re-programming" of new directives as to the usage of the body, joints and muscles.

Such work demands complete collaboration between the musician and the therapist who will also try to establish whether the patient has been under an emotional or stressful situation, in which case counselling or even a course of psychotherapy may be necessary. In some cases, both the physical and the emotional states have to be addressed and it is necessary that the patient, therapist and counsellor work in full consensus. *I make it clear that while I do not know much about the instrument and the technique, the musician does not know much about his body and how it functions!*

1. Observing the Posture

My actual treatment begins with the musician observing himself in front of the mirror, analysing every detail: how he stands, the position of the head, shoulders, what are the good or not so good aspects of his stance.

A relaxing massage of the neck and shoulders at this stage puts the patient at ease while he becomes aware of the tensions in that tender area.

2. De-programming incorrect aspects

We then get down to work. I aim at "correcting" the faults in his posture, helping him to achieve 'an ideal state of body and posture' through a few preliminary exercises:

(a) contract the buttocks while pulling the abdomen inwardly – both good for the lower back and the pelvis;

(b) move the shoulders gently towards the back, hold the chin downward, and imagine the head being pulled upwards by a string.

Manipulating the body in this way develops the patient's awareness of what it feels like when the posture is in correct state. It is not sufficient to practice these exercises only with the

therapist, it is the musician's responsibility to do them regularly several times a day until the new stance becomes automatic.

3. To liberate the body and muscles

The kinesiapist works both "externally", as I have done so far, as well as "internally". The instrumentalists learns to liberate the muscles of unnecessary tensions by concentrating on using only a group or groups of muscles needed for a certain movement while avoiding any superfluous contractions.

The kinesiologist does not treat only the local problem, whether the pain is in the hand, wrists, arms, but works on the whole body, the whole being, as well as the attitude towards one's studies. It is obvious that practising for many hours with an incorrect posture will result in rigidity in many parts of the body which in turn will bring certain problems and even injuries. It is not surprising that psychological problems or even depression often set in.

4. Re-programming the physiologically correct movements.

The instrumentalist is entering a new stage in the therapy, learning a series of "physiologically correct" movements needed in his instrumental technique and gestures which have to be repeated again and again. The musician has to make sure that the body maintains the state of balance which has been achieved during the previous session. All movements demand muscular contraction and release. In order to arrive at the correct muscular tension, the therapist uses two methods:

(a) concentrating one's attention on certain parts of the body or the playing apparatus, "ordering" the group of muscles which have to be used, to "relax", and

(b) the method of "hyper-contraction" of a certain part of the hand, or playing apparatus, then gradually release the tension, until the player reaches "the correct contraction", i.e. a correct state of balance of muscles.

I believe that it may be very beneficial for all instrumentalists to make a video of their practising. They will learn a

great deal and the work of the therapist would also be aided. Ultimately, both of them aim that the patient reaches a state in his therapy when he is able to "correct himself".

The best procedure would be to make a video in the early stages of kinesitherapy and another one at a later stage. I also believe that it is important to practise certain 'relaxation techniques' although any performance demands great intensity, a positive aspect of tension, not a relaxed state of the body!

5. Developing the right attitude

The therapist recommends a well structured programme of "re-education" which encouraging a healthy attitude towards one's studies. Fatigue must be avoided. Warm up before practising either by doing some gentle stretching, or some breathing exercises.

To begin with, practise only 5 - 10 minutes at a time, constantly being aware of the state of the body and muscles when using certain movements.

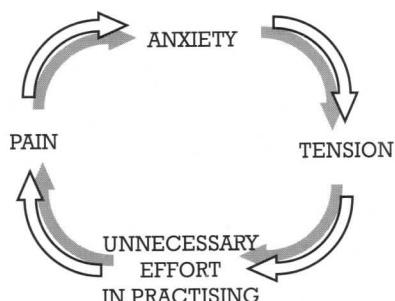
Take a short rest between practising bouts, do some "stretching" exercises or run for a few minutes in the garden or around the house: take a drink, hot or cold, depending on the season.

Gradually increase the time for practising sessions. Swimming is highly recommended, particularly the back stroke.

If pain occurs again, stop immediately. Analyse once again the posture and the movements to realise what has gone wrong. It may be the length of practising, a new and difficult piece of music, a change of technique or simply tensions that have crept in.

My advice is to avoid repeating again and again some difficult passages, which often cause tension and pain.

Fatigue is sometimes caused by very intense emotional state or crisis and a vicious circle sets in:



There are no strict rules in kinesitherapy as each musician has a unique physique and a unique personality. A good therapist should know how to approach each one of his patients. It is the musician's responsibility to realise that the therapy has to take its time, allowing the newly acquired knowledge to enter the 'automatic pilot'.

HOW TO PREVENT THE PROBLEMS DISCUSSED SO FAR?

"Prevention is Better than Cure" – this should be the goal of every teacher, student and performer. Here are my recommendations with special reference to pianists and piano teachers.

The pianist's hand has its specific structure and function and these have to be taken into consideration when studying the correct movements in piano playing.

One must also remember that the hand is suspended from the arm and that the arm is attached to the trunk. These form a complete unit with each part and there is complete co-ordination with the others.

The position and state of the arm and wrist play a vital role in piano playing.

When the wrist is dropped or 'flexed' it is relaxed and facilitates the functioning of the flexor muscles of fingers, allowing them to move with ease, faster and more economically.

In the same way, when the wrist is raised or 'extended', the extensors muscles of fingers function better.

The 'shoulder girdle' is the source of all arm movements. The hands and fingers are the organs which connect the pianist with the instrument. However, piano playing involves the whole body and an incorrect position or movement of the hands, shoulders or the trunk will affect the whole body and all the movements. A constant awareness of the state of the whole body must be maintained. Only in this way can a complete rehabilitation occur.

I had the opportunity to work closely with Philip Chamagne, the French kinesiologist specialising in 'upper limb disorders' in instrumentalists, including focal dystonia. He recommends a well structured programme of re-education:

(a) A fundamental physical and postural re-education (aimed mainly at the shoulder-girdle) combined with a study of 'selective muscular relaxation'.

(b) "De-programming" the incorrect position and re-programming a new body schema; in particular, to work on

the freedom of external rotation of the arms.

(c) Manipulating certain muscles to maintain a correct position with special emphasis on the role of the wrist and its movements.

(d) Correct interaction between the pianist and his instrument, observing hand position, movement and shape of fingers, which should touch the keys with the pad, under the nail, not excessively bent in an unnatural position and playing on finger tips. The balanced state of the whole body must be maintained throughout practice and performance.

Here are my **Ten Commandments** which my patients have to study to become aware of what 'to do' and what 'to avoid' in order to develop a healthy style of living and working.

1. Duration and intensity of practising.
2. Physiologically Incorrect gestures (wrong position of shoulders, stiffness in the wrists or arms)
3. Change of routine – (a different teacher with a different technique, the height of the stool, etc.)
4. The size and shape of hands (a pianist with small hands striving to achieve better results)
5. Special family or social upheaval which disturbs the pianist's emotional state
6. Aiming at 'perfection' can be a sword with two edges, urging the player to surpass himself physically and mentally.
7. Worry and general stress.
8. An immature musician unable to cope with the demands of the study
9. Irregular lifestyle – meals at odd times, lack of sleep or exercise.
10. Accidents or other traumatic occurrences forcing the pianists to compensate by using certain position of hands, fingers or arms, to avoid the painful spot.

It remains for all those involved in the field of 'Music Medicine' to collaborate closely to improve the present state of occupational hazards and ensure that these will be prevented in future.

Physical, Physiological and Psychological Problems of Flautists

Prevention and Therapy

by Carola Grindea FGSM

If someone walked around with his left shoulder raised, his neck twisted to the left and tilted his chin-down and his left arm held outstretched, palm upwards, or for six to eight hours a day for several years, he would surely develop marked and permanent postural deformities even if he never played the violin!

Similarly, if someone walked with bent arms in front of this chest and with an 800 grams weight suspended from his right thumb, you would expect that person to develop difficulties with his thumb, joints, wrist, arm and neck, even if he had never heard of the clarinet!

Thus begins Dr. Earl Owen's article in the Quarterly Magazine of New South Wales Music Teachers Association (May 1986). Dr. Owen is Medical Director of "Microresearch Foundation" of Australia and Consultant Professor of Medicine at Shanghai Faculty of Medicine.

He started as a concert pianist in England but decided to become a doctor and devote his life to medicine, while using his knowledge as a musician. Dr. Owen's article can apply to all instrumentalists who misuse their body. He has examined hundreds of performing instrumentalists and in the above mentioned article he presented the findings from 108 case studies. He came to the interesting conclusion that particular injuries are associated with specific instruments.

In my own work as Co-Director of the ISSTIP/London College of Music and Media "Performing Arts Clinic" which was set up in May 1990, I came to similar conclusions after working with more than 800 musicians, among them keyboard players, wind, brass, percussion players, guitarists, singers, as well as several actors, dancers and journalists (database available).

In this article I am discussing mainly the wind players physical, physiological and psychological problems, which sometimes develop into serious injuries or neuro-physiological conditions like *Focal Dystonia*. It is not possible to separate the physical and physiological factors involved, nor the psychological

ones, but we can analyse all these aspects separately.

Wind instrumentalists have to cope with two totally different aspects of technique in the usage of their bodies.

- (a) *The "Inner Organ"* – similar to that of singers – which demands a relaxed larynx and diaphragm as well as breath control.
- (b) *The "Outer Organ"* – the "hold", which requires freedom of muscular co-ordination, correct posture, a stance with no stiffening of muscles or joints.

These two aspects are closely interrelated and there is a continuous interplay between them. The slightest anxiety in the mind will create rigidity in the body affecting both the freedom of muscular co-ordination and that of breathing, which are vital in any performance.

Our main concern is how to prevent the many problems affecting performers and how to cope with them when they occur.

Causes of the various problems

I can state with great conviction that *most problems are caused primarily by excessive tension – physical and/or mental* – whatever instrument one plays. The two types of tensions – nervous and muscular – appear simultaneously and they act upon each other.

Another source of injuries is the misuse and overuse of the body muscles through incorrect "hold of the instrument", incorrect posture and incorrect *Ergonomics – the interaction between player and instrument*.

A great majority of flute players play in a most uncomfortable position with their spine twisted in one direction, the head turned in a different one, while tensing their shoulders, arms, wrists and hands to accommodate the instrument.

Teachers and performers are advised to observe the *main centres of*

excessive tension - the wrists, elbows, shoulders, neck and the face (mainly jaw and round the mouth).

Physical and Physiological Preparation

1. *Posture and State of Balance of the Body* play a most important role.

To avoid any physical problems the wind player learns to acquire a correct posture with perfect alignment of head, neck and back, holding the instrument with no stiffening of any joints or muscles; he learns to play with total freedom of movements.

There cannot be what one calls "relaxation" in performance – even the term is conflicting with the intensity needed for a vibrant performance – and there should be no negative tensions. The answer is "*a state of balance*" of the body in practising and in performance.

I recommend two physical exercises which help release tensions in the neck area, the shoulders and all along the arms.

- (a) standing at ease, raise both shoulders as high as your ears, count slowly up to 3, then drop them, very relaxed. (Repeat 2 - 3 times; experience release of tension at the back of the neck.)
- (b) With legs slightly apart, swing your arms (with palms facing app. 30 inches apart): forward, up, backwards, stretching arms as much as possible, then swing them horizontally, stretching them; drop them completely relaxed. Observe that the shoulders are in their correct position.

(Do these exercises two or three times).

The following *mental exercise* (Grindea Technique) corrects any imbalance in posture and brings the body in an ideal state of balance, at the same time bringing stillness in the mind.

ISSTIP JOURNAL — No. 10

The Grindea Technique

1. Stand with feet slightly apart, preferably facing the mirror, to observe every detail of your stance. The shoulder girdle and both shoulders must be in line and in the correct position.

Raise the sternum gently, (bosom up, ladies!) and observe that the shoulders are placed towards the back, not forward and not as so often happens, one shoulder brought forward, or one is higher than the other.

2. Concentrate your attention on the spine, ordering it to lengthen in an upward direction; allow this to happen while standing absolutely still. You will become aware that the spine obeys your command, moving gently upwards, lifting the head then placing it towards the back, on the last vertebrae (the atlas). At this moment there is a perfect alignment of head, neck and back and any residue of tension at the back of the neck has disappeared.

3. Exhale very slowly, whispering "aaaaaaa" for as long as possible, on one breath; then allow the body to breathe in; wait for a few seconds, then repeat the breathing exercise. One single exhalation brings many physical and physiological changes: a great deal of warmth is flowing into the hands and fingers, the arms are actually longer, hanging very relaxed on each side of the body while there is also release of tension in the "solar plexus" area – the diaphragm. The shoulders have dropped conspicuously and the shoulder girdle is well poised. It is very important that the head remains in the correct position and the alignment is maintained. The neck has lengthened through the long exhalations and the player gains one or two cms. in height. There is a wider opening of the larynx area which is totally relaxed allowing an easy, effortless flow of air – so beneficial to singers and wind players in particular.

4. Concentrate your attention on the ankles and knees and imagine them being supple and flexible. You will experience a lightness in the body, having the sensation of an upward swing, almost floating. **When this happens there is an exhilarating feeling of total liberation of any tensions, only the "muscle tone" holds the body in "an ideal state of balance", as if the gravity has lost its power.**

This simple and easy to learn technique demands only a few minutes of concentration but the results are invaluable. It affects not only the

physical and physiological well being, but also, the mental state. The player experiences "stillness" in the body and in the mind for those few moments.

This is the state of the body and mind during "the peak experience" in performance – that magic moment when the player experiences a total integration of mind, body, music and instrument.

I recommend this technique when the player is facing the audience and is ready to start his recital. It silences the "inner dialogue" which affects the quality of performance.

Interaction between Player and the Instrument (Ergonomics)

The instrumentalist is now ready to move on to the next stage, learning how to maintain the "state of balance of arms and body" when starting to play his instrument.

Correct ergonomics demands physiologically correct movements, i.e. in harmony with the body, not against it.

My recommendations are:

(a) *Facing the mirror, mime how you hold the instrument when standing.*

Study your posture, the spine remains erect, vertical, while the shoulder girdle creates a horizontal line (the body has the shape of the cross) and be aware of any tensions creeping in any part of the playing apparatus: arms, shoulders, elbows, wrists, or hands. I call this "*the moment of truth*". Very often the player appears surprised to find how much stiffness is created even when thinking: "I am holding the flute."

In fact, from now on, he finds almost immediately a correct way of "behaving" when interacting with the instrument. Arms are "hanging" freely from the shoulders on each side of the body, oscillating like a pendulum, without the slightest stiffness in any of the joints. It is interesting to note that *when in state of balance, the arms become weightless and the player has the sensation of "no arms".*

(b) *The player learns to pick up and hold the instrument.* The flautist picks up the flute with one hand, lifts it, moves the arm gently in various directions. He holds it with both hands, raises it to shoulder height then swings it. Gradually he realises how little energy is needed to hold the flute,

(c) The next stage is to *hold the instrument in playing position*, as he had mimed it. Study carefully every detail: position of shoulders, the alignment of

head, neck and back. Observing oneself in the mirror is very helpful and can speed up the process of learning.

Adapt the Instrument to the Body not vice versa.

Many flautists distort their bodies to "accommodate" the instrument. It should be the other way around.

"Accommodate the instrument to the body", which should ideally remain in the "vertical" position.

It is obvious that there are several "Schools of Flute Playing" and I cannot enter here into any debates as I am not qualified to say whether one approach is better than the other. There are different schools of thought in all instrumental and vocal techniques. What matters is that the movements used to play the instrument should respect the physiological principles of "tension and release".

An experiment with the computer* conducted by two American piano teachers gave the following result: "the 33 muscles situated in the hand between the wrist and the tips of the fingers can produce no fewer than 2,432,902,000,000,000 muscular combinations".

The question is "How can the freedom of muscular co-ordination be maintained?"

The answer is "*differential relaxation*" – which means that only the group of muscles needed for a certain movement are active, while the rest of the body remains alert but in a state of balance.

Psychological Preparation: Coping with Stress and Anxiety in Practising and in Performance

So far I have dealt with the physical and physiological factors in practising, in preparation for performance. But there should be a thorough psychological preparation so that the musician will be able to give a fully satisfying performance.

We all know – to a certain degree – what stage fright or anxiety means and how crippling it can be.

Psychologists recommend several "strategies":

(a) substitute negative thoughts with positive ones ("I am not really too bad", "I am trying my best" ...)

*"Beyond Ortmann and Schultz" by Samuel and Ethel Lhrer, ISSTIP Journal No. 3, November 1985)

(b) study the process of "desensitisation", a technique widely used in Sport Psychology: imagine your performance while sitting, relaxed, in an arm chair, or lying on your bed, going in your mind through all the possibilities of "the game", in your case through your recital. Start with an insignificant mishap, such as one wrong note, squeaky sound, etc. "Well, who does not experience such a moment? This is not that important" is the usual silent comment. You then go through real disasters, progressively, imagining more scary moments, like loss of memory, wrong entries, total inability to continue, etc. Psychologists believe that by "living" these catastrophes in your mind, one is actually prepared to go through such mishaps when facing an audience.

(c) I recommend a similar coping technique which seems to be helpful known as "Creative Visualisation" which is extensively used in Sports Psychology.

This demands *Mental Rehearsal*, to be practised regularly for three to four weeks before a concert.

There are two stages:

1. Study the score without the instrument, imagining how you play, listen in your mind to the music and be aware of the kinesthesia, of the freedom of physical and mental tensions, observe when you take a breath, etc.

2. Lying relaxed on your bed or sitting in an arm chair, imagine your entire performance: how you appear on the stage, the audience receives you with great warmth, waves of love and admiration flowing towards you. You give your *ideal, flawless performance*, as you always wanted to achieve. The audience is thrilled, and so are you as you have been able to communicate your ideas, your emotions – and everyone is happy.

The ideal performance which you have imagined, will be stored in your "memory bank". If you are able to "perform" well in your mind, why shouldn't you do so in the actual performance?

It is also very helpful to rehearse the programme as often as possible, playing for a few friends or colleagues. It is advisable to record your programme on tape, then listen carefully as an outsider. I consider this the best method of "self-teaching".

What to do at the actual moment when facing the audience.

You have done your work and you are now ready to enjoy your music making.

(a) Bring the body in "state of balance" which brings also stillness in the mind (by now this should take only 20 - 30 seconds).

(b) Exhale slowly being aware of the calming down of the physiological reactions – palpitations, trembling hands or lips, sweaty, cold hands.

(c) Ultimately, trust yourself, trust your body and the work you have put into the preparation and you will be served. Allow the music to flow through you, through your arms, through the instrument and beyond, to the audience.

To be aware of complete freedom of movements allowing the superb muscular co-ordination and flow of memory to function is to experience the joy of giving of one's best.

General Advice to Musicians

Christopher B. Wynn Parry, M.B.E., M.A., D.M., F.R.C.P., F.R.C.S.

*Neurolog/rheumatolog, Consultant Adviser at ISSTIP and BPAMT Performing Arts Clinic
Co-author (with Ian Winspur, F.R.C.S., F.A.C.S.) of the highly acclaimed book "The Musician's Hand" (Martin Dunitz).*

Responsibilities of Performing Musicians

1. Importance of general fitness.
2. Importance of good posture.
3. Good, well balanced diet.
4. Need to work on RELAXATION.
5. Importance of "warming-up" and "cooling down".
6. Sensible practice technique: not more than 20-30 minutes at a time. STOP and stretch for five minutes or have a drink.
7. Need to have some "body control" technique so that musicians can control the body in times of stress and not let it control them!
8. Need for recreation/holidays.
9. Need to develop a broad culture.

Responsibilities of Teachers

1. Correct choice of instrument for musician's body build and temperament.
2. Correct technique from early stages.
3. Inculcate sensible practice and study technique.
4. Early referral to Doctor/Therapist in case of trouble.

Playing should never be painful if technique is sound, body fit and mind and spirit calm!

The 'General Advice to Musicians' is an excerpt from the session presented at ISSTIP Conference (October 1997) at RFH, Southbank, London

Motivation Factors in Croatian Music Schools

by Radojka Suceska Ligutic

Psychologist attached to Music School in Croatia

In CROATIA, like in other Eastern European countries, Music Education plays a very important role in the system of education. Most children who show musical aptitude are accepted in state Music Schools from the age of 6 or 7, where they receive their full music education, starting from primary schools continuing at the secondary levels up to the age of 18. Parallel with these studies the children attend the regular schools for a minimum of 30 hours every week.

Pupils in Primary Music Schools attend the schools three or four times a week, for six hours tuition: twice one hour Instrumental lesson, twice one hour Solphege and two hours Choir singing.

In the Secondary Music Schools, pupils spend 12 to 17 hours every week on music education, studying their Instrument, Solphege, Harmony, History of Music, Musical Form, Polyphony, and Chamber Music and at the end of the year all students have to pass examinations in every subject.

In fact, these students attend two schools at the same time, notwithstanding the time spent travelling from one place to another. They are also expected to practice their instrument every day which means between two and four hours each day.

A special programme was recently initiated in Zagreb by the Directors of four music schools who were concerned with the various psychological and physical problems presented by the young students and particularly with the inability of their teachers to help them.

I was entrusted with this project in my capacity as Psychologist at these Music Schools. This was a new departure and I had to find a systematic approach to deal with the situation. Fortunately, the Directors of the schools were very helpful not only by allowing me complete freedom to devise a suitable approach so that I could, first and foremost, gain the youngsters' trust, but also by supporting my endeavours to broaden my own studies.

Thus I was able to go to London to study with Carola Grindea, observing her work with musicians at the ISSTIP Performing Arts Clinic at London College of Music and Media, which gave me an understanding of the physical problems and injuries which, invariably, were accompanied by psychological disturbances. I also had the opportunity to discuss my studies with psychologists specialising in this field, among them Andrew Evans, Art Psychology Consultant, and Dr. Elizabeth Valentine,

Head of Psychology Department at Royal Holloway College.

My main object was to find a way to reach these young students to encourage them to talk about their problems, their doubts, their aspirations without appearing to be patronising nor to be prying into their innermost 'secrets'. This was not an easy task

I set up a preliminary Survey with a Questionnaire for students aged 12 - 16 to find out first of all how they cope with their daily tasks and, particularly, with the inevitable fatigue.

The results of this first Survey presented some interesting aspects:

- | | |
|-----|---|
| 17% | Experience fatigue |
| 34% | Do not find time for extra activities |
| 49% | Cope well with their studies and find time for other activities |
| 40% | Have one hobby in addition to music |
| 26% | Have two or even three hobbies in addition to music |

A most interesting conclusion revealed that tiredness was not the reason for students to quit music studies but was connected with high personal standards of achievements.

A second Survey was conducted with 220 students from the Sixth Form of Primary Schools and Second Form from Secondary Schools which included 60 who stopped their music education three years earlier.

The Questionnaire included the following:

- (a) **How much their motivation is due to their teachers?**
- (b) **How do they cope with the hectic rhythm and with fatigue?**
- (c) **What are their goals and what are the benefits of their music education?**

(a) The Role of the Teacher.
Who or what has inspired you to study music?

- | | |
|---|-----|
| 1. Instrumental or Solphege Teacher | 54% |
| 2. Parent of a family member | 45% |
| 3. The Sound of the instrument | 11% |
| 4. My own interests or famous musicians | 16% |

Note: The percentage is higher than 100% because some students have chosen more than one question.

My comments:

The teachers share the responsibility for the child's motivation with the parents and in many cases with grandparents. The teachers' support and encouragement together with that given by parents play a vital role in the children's musical development.

Learning to play an instrument is a slow process but with the help of a stimulating teacher, the experience can be very rewarding.

How to become a friend to your instrument?

If you would only try, you would find a beautiful new world of sounds. Just listen to the different sounds which you can make, which you can create out of the instrument. But playing an instrument means much more. You can talk to it, you can make it sound gently or loudly, you are able to bring your moods, whether you are happy, contented, upset or sometimes angry. Your instrument can comfort you, it will tell you a lot of things about yourself, about life, if only you two become friends.

To make friends with your instrument you must be patient. Try to learn just a little every day. Remember – no friendship can be made in one day.

(b) What about "Having to...?"

- I have to learn...
I have to play...
I must not make mistakes...

Words have great power. Some words fill us with energy, like sunshine, while others make us feel worn out, exhausted like a grey winter day.

No other word makes you so tired as "I HAVE TO..."

No other word reduces the will so effectively.

No other word brings out one's stubbornness better...

Therefore, 'think positively'

I will do...

I like to do this...it is important for me...

I enjoy doing this...

(c) Their Goals and the Benefits of their Music Education?

The students (60 former students and 160 current students) presented their own assessments regarding this question, while also comparing themselves with colleagues who do not attend Music Schools.

I Self Development	83%
1. Musical knowledge, personal taste and attitude to music	
Better understanding of music	
29%	
2. Variety of interests and cultural pursuits, Broader outlook	29%
3. Higher developed abilities: concentration and memory, time management, studying habits, self confidence, more relaxed, valued by peer	25%
II Playing Skills	20%
III Personal Satisfaction	30%
1. One more enjoyment in life	16%
2. I can entertain my friends	6%
3. I never feel bored	8%
IV Practical Benefits	19%
This percentage covers the following assessments:	
1. Good marks in music at the regular schools	
2. Being excused from school when having a performance	
3. Better opportunities for employment	
V Getting more friends and a more interesting social life	10%

Studying the answers one can draw valuable conclusions.

Music Education has a profound influence on the students' development. It broadens their interests and knowledge, it improves their concentration and memory, their organisational skills and, particularly, their self-realisation as proved by their own answers to the questionnaires.

Both the present students and the ex-students showed that they consider music as a personal need and, as such, as part of their everyday life. Making music is an enjoyment, not an obligation.

The satisfaction of being able to play an instrument and developing one's skills seems to be at the top of the chart.

These students are committed to the realisation of their potentials and their personal development

Music education certainly improves the quality of life. It fosters self development which, in turn, brings self-confidence, so important for young performers. They trust their work, their

achievements and their life is infinitely more interesting and more exciting.

These are intrinsic motivational factors.

Motivation is the key to success or failure in teaching music.

The secret of successful teachers lies in his/her ability to stimulate the students to develop their potential to their utmost.

To develop *intrinsic* motivation a good teacher will know when to use *ex-trinsic* motivation such as praise when merited, constructive criticism instead of negative statements about the student's performance or exerting pressure to reach the goal, i.e. "be ready" for the examination or for the concert.

In my own work, as psychologist, I am trying to help these talented young musicians to adopt a healthy attitude to their studies, learning to cope with the many difficulties in a more relaxed manner, allowing themselves to make mistakes, laugh at them, not always strive for perfection.

Two aspects of the Psychology of Performance: Personality Profile and Links with Sport; Stress Arousal and Anxiety in Performance by Judith Brulo, Viola player and teacher

This article is based on a M.A. Dissertation at Sheffield University (Psychology of Music) and it endeavours to cover two pertinent aspects of performance: (a) Personality Profile and Links with Sport and Stress, (b) Arousal and Anxiety in Performance.

We are thankfully becoming more aware of the physical problems faced by instrumentalists and singers. Whilst this awareness is laudable one must not neglect the equally important issue of the *personality profile of the musician* because this dictates largely how he/she will approach the physical task of performance preparation. Those who are familiar with Anthony Kemp's book "The Musical Temperament" (1996) will be aware that he believes this to be so. He writes: "Such a profile might be viewed as a window into the musician's deeper psychology and as an indicator of the demands that the development of these musical skills constantly makes upon the individual. By addressing these kinds of questions we are able to develop a broader understanding about the nature of musicianship and the ways in which musical skill interrelates with temperament, thus

providing a more comprehensive view of that musicians do and why. In other words, it is not only what people are able to do that determines their work but also what kind of people they are." (Kemp 1996. *Preface*).

Those in the business of training athletes have been aware for many years of the need to understand personality profile of those they train, in order to provide for them the optimum training regimes. They have no doubt that this kind of help directly affects performance. Although many musicians manage to cope somehow, there are many more who suffer needlessly and would have benefited from more specific help. This state of affairs should be addressed and awareness of these aspects should be part of the musicians' training.

Issues relating to *performance stress* are outlined in "Psychology for Performing Artists: Butterflies and Bouquets" by Glenn Wilson (1994). He sets out the various strategies/ techniques, mental and physical, that are available for coping with the rigours of performance. My concern is that this help for the most part is extra-curricular and not integrated sufficiently into musicians learning

programmes. The hard-pressed musician often has to find funds from his/her own pocket for such necessary help.

In the larger general study, interviews were conducted with six professional performers-teachers. They were asked how they prepared physically and mentally for solo performance and how they managed concert nerves. Briefly the findings were as follows. On the subject of physical demands, there were obvious differences across the instrument groups but there were also parallels, for example, between bow movement exercises for string players and breathing exercises for singers and wind players. Within each instrument group it could be seen that whilst there were many instrument specific similarities the individual differences in personality affected certain aspects of the physical preparation.

In the case of mental performance preparation and concert nerves, this was not entirely instrument specific. Each musician across and within instrumental groups had developed his/her own particular regimen for the mental preparation specific to their individual personality and psychology.

Performance Anxiety: A Study of Children in Musical Education

A Summary of a Masters Thesis by Anna Rún Atladóttir at the London College of Music and Media, 1998

PERFORMANCE anxiety is a widespread problem among professional performers, and information about its childhood origins may provide teachers with a valuable means of helping musicians early in their performing lives. As performance anxiety is closely related to self-image, it seems reasonable to seek the onset of performance anxiety in the pre-teen years, at the stage in life when individuals begin to develop their self-image. My research project was based on a questionnaire and investigated whether and to what extent 49 music students aged between six and thirteen experience performance anxiety, with an emphasis on the possible differences in anxiety levels according to gender, age and various other background factors.

The results demonstrated that children exhibited differences in performance anxiety and that age, gender, behavioural practices and family background were all-important factors in determining anxiety levels. Of particular interest was the finding that performance anxiety increases with age in girls between the ages 6-13, whilst remaining almost unchanged in boys over the same age range (see Figure).

Various environmental factors were seen to influence performance anxiety

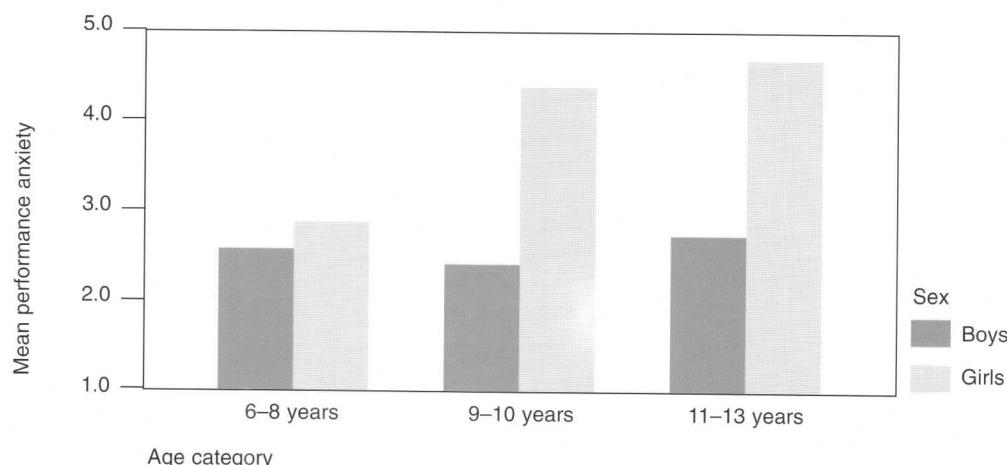
in children. Those who came from families where parents were living apart were notably more anxious than those who came from homes where the parents lived together. It was also interesting to note that children suffer more from performance anxiety if one or both parents play an instrument themselves. Children who had siblings that also played instruments showed the same tendency although less clearly.

Children with high levels of performance anxiety tended to focus their thoughts on the audience during performances, while children with low levels of performance anxiety tended to focus on the music itself and the sound they were creating. In a state of anxiety task-irrelevant thoughts and "self-talk" dominate the mind. By practising to focus on specific features of the music, for example, sonority, mood, lines or the piece structure, it is possible to help the child avoid task-irrelevant thoughts and "self-talk" in performance.

For those children afflicted by performance anxiety perhaps the most effective way of removing this obstacle is to familiarise them with the performance situation. Indeed, children who frequently play for others tended to be less anxious. While it is not clear whether frequent performing leads to

less anxiety, or whether less anxious children simply perform more often, it does seem sensible for teachers and parents to encourage children to play *regularly* in front of others under less stressful circumstances than concerts or exams (and not just the week before a concert or exam!). For most children this familiarity of performance should lessen the impact of performance anxiety. Another means of familiarising children with performance situations is through the imagination. Self-confidence can also be built up through attitude training by teaching children to replace negative thoughts and words with simple positive words like "want to" and "can". Yet another way is to help children re-evaluate anxious feelings, by thinking of them as helpful and not threatening. In this way, children get used to feeling nervous and accept it as something normal and inevitable.

While there is no one simple solution to the problem of performance anxiety, and there are limits as to how much a teacher can help an anxious student, my findings can hopefully contribute to an increased understanding of performance anxiety early in the musical career and ways to tackle this problem. We should strive to give the child the chance to discover the excitement rather than the anxiety of performance.





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